



**HAMMONTON  
GREEN  
COMMITTEE**



**PARENTAL/GUARDIAN CONSENT**

\_\_\_\_\_, a minor child, wishes to participate as a Hammonton Green Committee and/or Hammonton Community Garden Volunteer (“Activity”). The Hammonton Green Committee involves activities in multiple locations, including but not limited to road cleanups. As the minor’s parent/guardian, I hereby consent to his/her participation in the Activity. I am not aware of any physical or medical condition that would interfere with the child’s ability to participate. If the child is injured or becomes ill and neither I nor any other parent/guardian identified below can be reached, I give the Hammonton Green Committee permission to seek medical attention for the child.

\_\_\_\_\_ Signature of Parent/Guardian

\_\_\_\_\_ Date

\_\_\_\_\_ Printed Name of Parent/Guardian

Media Release: I understand that the child may be photographed during the course of the Activity. I grant full and unlimited permission to the Hammonton Green Committee, and its agents and affiliates, to use the minor’s name, photographs or any other record of participation in this Activity in any broadcast, telecast or other account of the Activity for publicity purposes, without compensation, by placing my initials here. \_\_\_\_\_

**EMERGENCY INFORMATION**

Please indicate how we can reach you in an emergency:

**Parent/Guardian 1:**

**Parent/Guardian 2 (or Emergency Contact):**

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Home phone: \_\_\_\_\_ Home phone: \_\_\_\_\_

Mobile phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_

Office phone: \_\_\_\_\_ Office phone: \_\_\_\_\_

**Child’s Physician:**

Name: \_\_\_\_\_

Office phone: \_\_\_\_\_

School Name: \_\_\_\_\_