



Youth Volunteers for Conservation



Participant Information

Full Name of Participant:

Preferred Name of Participant:

Participant Phone:

Participant Email:

Parent/ Guardian Contact Information

Parent/Guardian Name:

Mobile phone:

Work phone:

Email:

Emergency Contacts Information

Please list **ALL** adults who we can contact in the event of an emergency (if the primary contact is unavailable) and who are authorized to pick up your child. For the safety and security of your child, only those listed on this sheet will be allowed to pick-up your child. No exceptions will be made.

Name: Relationship: Phone:

Name: Relationship: Phone:

Name: Relationship: Phone:

How is your child getting to and from events? (check all that apply)

- Drop off/Pick up Taxi/Ride service Carpool w/ other participant
- Own Vehicle (driving self) Other _____

Health History

Medical Conditions: Does your child have a medical condition(s) we should be aware of? If so, please provide specific information including reaction, management, frequency, and any other necessary information.

Details:

Allergies:

Does your child have allergies? Yes No

If yes, what is your child allergic to?

Does your child require an EpiPen? Yes No

If your child requires an EpiPen, please provide one non-expired EpiPens as well as any other necessary medications to treat their reaction.

Any other medical information you'd like to share? (i.e. medicines, dietary needs, etc.)

Details:

Waiver Information

Please read carefully the information below and continued on the next page. Each line must be initialed stating you understand and agree with what is written. The bottom portion of this page must also be completed and signed. Your child may not participate in the Junior Naturalist program without the receipt of the initialed and signed waiver form below.

Liability Exclusion (Parent/ Guardian)

_____ Liability Exclusion: By participating in the Youth Volunteers for Conservation program with Dane County Parks, you voluntarily assume for your Minor all risks and voluntarily release Dane County, the Lussier Family Heritage Center, and their agents and employees from all liability for any illness or injuries you or your child may receive as a result of participating in the Youth Volunteers for Conservation program and Dane County Parks volunteer activities and events.

_____ The volunteer participant understands that they are not a Dane County employee and is not entitled to compensation in any form, including but not limited to wages. As a non-employee, the Volunteer further understands that he/she does not qualify for worker's compensation benefits if injured while performing volunteer work, and therefore, the Volunteer should have personal medical insurance.

_____ The Volunteer understands that Dane County carries general liability insurance and the volunteer participant may be eligible for legal defense and indemnification by Dane County if someone brings a claim against the Volunteer based upon the services performed by the Volunteer in good faith for Dane County.

_____ I also understand that while Dane County Parks has significantly increased health and safety measures in response to the ongoing pandemic, an inherent risk of exposure to COVID-19 exists in any space in which people are present.

Program Agreements (Parent/ Guardian & Youth)

Both the participant and parent should initial the following, as young adults participating in our conservation volunteer program it is important that both youth and parents are aware of our rules and policies.

_____ _____ Wear appropriate work clothing and shoes as described in each event description (these may vary based on the activity type, *i.e. stream monitoring vs. brush removal*).

_____ _____ Comply with established Dane County policies and procedures, including safety rules listed on www.danecountyparks.com/volunteers

_____ _____ I authorize my child to participate in program activities and give the Dane County Parks permission to use photographs and video taken during programming for public relations purposes and advertising.

Signatures (Parent/ Guardian & Youth)

Participant Name:

Participant Signature:

Date:

Parent/Guardian Name:

Parent/Guardian Signature:

Date: