

2024 VOLUNTEER SERVICES PARENTAL PERMISSION FORM

Please select the Vo	lunteer Area in which your child is volunteering:
	come Centre □ Alternates □ Green Team □ Bike Park □ Booth □ Signage □ Stage Crew □ Box Office □ Volunteer
	☐ Fundraising Ambassadors ☐ Other (please specify):

Dear Parent or Guardian,

The Ottawa Bluesfest organization appreciates your child's interest in volunteering for the festival and we thank you for your time and involvement in this matter. In order for your child to participate in our volunteer program, you must read, understand and agree to the following terms:

- I understand that individuals between 15 and 17 who wish to volunteer with Ottawa Bluesfest must have their parent or legal guardian read, understand and complete this form:
- I understand that Ottawa Bluesfest volunteers must be at least 15 years of age before July 4th, 2024;
- I understand that my child will not be able to attend their shifts unless this form is completed and returned to Volunteer Check-In upon signing in for their first shift, without exception:
- I understand and recognize that my child's participation as a volunteer at Ottawa Bluesfest involves potential risks. I hereby agree to accept such risks and to waive any rights to make a claim against the festival, save and except in the case of the negligence of Ottawa Bluesfest. I hereby personally undertake to have my child act responsibly and in a safe manner at all times and hereby agree to indemnify Ottawa Bluesfest and all the festival employees, volunteers and partners from any claims of damages caused as a result of my child's negligence while acting as a volunteer.
- I have reviewed the shifts my child has signed up for, as well as the requirements of their position, and understand what they will be required to do and that they are required to complete their shifts as scheduled, per their volunteer agreement;
- I understand that photography and videography will be utilized during this event. I grant permission to the organization to use my child's likeness, voice and words in television, radio, film, or in any other format for volunteer recruitment.



l,	(Parent or Legal Guardian Name)
have read, understood and agree to all of the terms above	e as they apply to my child,
	(Please print child's FULL NAME).
Parent or Legal Guardian's Signature + Date	
Contact Phone #:	
Email Address:	