



Imkaan Welfare Organization

Parent/Guardian Consent Form for Volunteers

My name is _____ and I am the parent or a legal guardian of the
minor child named _____

Parent/Guardian Information:

Full Name: _____

Relationship to minor child: _____

Address: _____

Email Address: _____ Cell phone: _____

Alternate number: _____

Minor Child Information:

Full Name: _____

Relationship to minor child: _____

Address: _____

Email Address: _____ Cell phone: _____

Alternate number: _____

By signing this document, I declare the following:

- I am truly the parent or a legal guardian of the minor child named above.
- I am aware that the minor child named above has an interest in becoming a Volunteer at Imkaan Welfare Organization.
- I give my full permission to Imkaan Welfare Organization to guide and prepare the minor child named above to become a Volunteer.
- I have given permission to the minor child to volunteer at Imkaan Welfare Organization field projects.

Parent/Guardian Signature

Date: _____