



NCAS Volunteer Parental Consent Form

This is the accompanying parental consent form for minors applying to volunteer at NCAS events. If you are the parent or guardian of a minor aged 16-18 that would like to volunteer, you must complete this form and hand it in with the minor's volunteer application. All fields are required.

Minor's Legal Name

Parent/Guardian Legal Name

Parent/Guardian Email Address

Parent/Guardian Email Address

Acknowledgement and Signature

By signing this form, you indicate the following.

1. I signify that I am the parent or legal guardian of the above-named minor, and I hereby provide consent for the above-named minor to volunteer for NCAS events.
2. I signify that the above-named minor is 16 or 17 years of age at the time of signing.
3. I agree to indemnify and hold harmless NCAS, its venues, its vendors, its contractors, and its content hosts from any claim for personal injuries or other damages or equity arising from the above-named minor's activities while volunteering at NCAS events. I agree also to accept full responsibility for the actions and behaviors of the above-named minor while volunteering at NCAS events. I agree also that NCAS bears no responsibility to monitor the whereabouts or activities of the above-named minor, or to convey any messages from me or from any other party to the above-named minor.
4. I have read this parental consent form and state that I have understood it and am voluntarily signing it without any inducement or representation whatsoever from any member of the staff of NCAS, its venues, its vendors, its contractors, or its content hosts.

Web: <https://NCAnthroSociety.com>

Email: Contact@NCAnthroSociety.com

Phone: +1 (984) 528-0353

Mail: 4030 Wake Forest Rd., STE 349, Raleigh, NC 27609

Acknowledgement and Signature (Continued)

Signature

Date

This parental consent form is not valid unless signed.

Notary Statement (To be Completed by a Notary Public)

BEFORE ME, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument, and having been by me first duly sworn an oath, acknowledge that he/she had executed the same for the purpose and consideration therein expressed, and that the foregoing statements are true and correct.

GIVEN under my hand and seal of office, this _____ day of _____, 20_____.

Notary Public in and for _____ County, in the state of _____.

Signature of Notary

Printed Name of Notary

Commission Expiration Date