



# Centerville High School Silver Cord Program Student/Parent Agreement

## Student

Name \_\_\_\_\_ Graduation Year \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

## Parent

Name \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

## Initial items of agreement

Parent      Student

\_\_\_\_\_      \_\_\_\_\_ I have read the information given about the Silver Cord Volunteer Program and hereby grant permission for my child to participate in the program and release the school, other locations, their offices, agents, and employees from any liability that may result during volunteer and/or job shadowing activities

\_\_\_\_\_      \_\_\_\_\_ I hereby give my child permission to drive to the school, business, or community organization in order to volunteer for the Silver Cord Program. I agree to inspect and maintain the vehicle and keep valid insurance coverage on it at all times. I release the school, other locations, their offices, agents, and employees from any liability that may result from the use of individual transportation

\_\_\_\_\_      \_\_\_\_\_ I grant permission for my child to be photographed for promotional and/or education purposes

\_\_\_\_\_      \_\_\_\_\_ I agree to all of the terms about and grant my child permission to participate in the Silver Cord Program

My signature states my understanding that if the event does not meet the Silver Cord requirements, the hours I earn may not be counted. I promise to be a good representative of Centerville High School at all times.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

My signature represents my approval of my child's participation in the Silver Cord Program.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_