

**VOLUNTEER WAIVER AND RELEASE OF LIABILITY
FOR MINOR VOLUNTEERS
LIVING WATERS-WEST LA DBA A CHILD'S DREAM-CA**

In consideration of being permitted to participate in volunteer activities with Living Waters-West LA dba A Child's Dream-CA, I, the undersigned, as the parent or legal guardian of the minor volunteer,

_____ [Minor's Name], hereby agree to the following:

1. **Assumption of Risk:** I understand and acknowledge that volunteer activities may involve risks of injury, illness, or property damage. I voluntarily assume all risks associated with my child's participation, including, but not limited to, risks arising from the negligence of Living Waters-West LA dba A Child's Dream-CA, its agents, employees, or volunteers.
2. **Release of Liability:** I hereby release and discharge Living Waters-West LA dba A Child's Dream-CA, its officers, directors, employees, agents, and volunteers from any and all claims, demands, damages, losses, or liabilities of any kind, arising out of or in connection with my child's participation in volunteer activities.
3. **Medical Consent:** I authorize Living Waters-West LA dba A Child's Dream-CA to seek medical attention for my child in the event of an injury or illness during volunteer activities. I agree to be responsible for all medical costs associated with such treatment.
4. **Photo Release:** I grant Living Waters-West LA dba A Child's Dream-CA permission to use photographs or videos of my child taken during volunteer activities for promotional or other purposes.

By signing this waiver, I acknowledge that I have read and understood the terms of this agreement. I agree to these terms voluntarily and without duress or undue influence.

[Parent/Guardian Signature]

[Date]

[Printed Name]

[Contact Information]