



Youth Permission Slip

Youth Volunteer Name: _____
(please print clearly and legibly)

Date of Birth: ___/___/_____

I, _____, parent/guardian of _____, give my permission for _____, to be a volunteer at Answers in Genesis, the Creation Museum, and the Ark Encounter. I have read and understand the policy for youth volunteer supervision and will abide by it.

In consideration of the opportunity for the above-named child to experience, participate and serve as a volunteer at *Answers in Genesis*, the Creation Museum, and the Ark Encounter (referred to as the “ministry”), and in my capacity as parent or legal guardian of the child, I hereby release, and agree to indemnify and hold harmless, *Answers in Genesis*, its museum, its ark encounter, its officers, directors, employees, agents, volunteers, and representatives (the “released parties”) from and against any and all accidents, injuries, liabilities, loss, or damage to persons or property which may occur in connection with such services while the child is on the premises, and I agree to waive all rights of recovery against the released parties and to assume all risks associated with the child’s participation or presence as a volunteer at the ministry, to the fullest extent permitted by law.

Parent/Guardian Signature: _____

Date: ___/___/_____