

**Permission and Release Form for Family Volunteers**

This form is to be filled out by the parent or legal guardian who will accompany the child/children aged 10-13 volunteering at the New Rochelle Humane Society. Please read and complete this form, sign it and return it to our shelter.

**Please Print All Information!**

Parent/Legal Guardian's name: \_\_\_\_\_

Relationship to child/children: \_\_\_\_\_

I give permission for the following child/children to participate in the New Rochelle Humane Societies activities:

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_ Email: \_\_\_\_\_

School(s) children are attending: \_\_\_\_\_

\_\_\_\_\_

Animals in your household: \_\_\_\_\_

\_\_\_\_\_

**New Rochelle Humane Society  
70 Portman Road  
New Rochelle, NY 10801  
Ph: 914.632.2925 / Fax: 914.632.0445**