

# Minor Volunteer Registration Agreement

<b>Minor Name (Print):</b>	<b>Parent/Guardian Name (Print)</b>	<b>Date(s) of Service:</b>
<b>Mailing Address:</b>	<b>Mailing Address:</b>	<b>Work Site/Location Name:</b>
<b>City/State/Zip:</b>	<b>City/State/Zip:</b>	<b>Type of Work:</b>
<b>Contact Number:</b>	<b>Contact Number:</b>	<b>DNR Contact Person:</b>
<b>Email:</b>	<b>Email:</b>	

**Purpose** The purpose of this minor registration is to enroll the persons named below as volunteer for the Washington State Department of Natural Resources (DNR). As a volunteer they will enhance the Department's ability to carry out its responsibilities and achieve its mission and goals in the public interest. Need to complete or register on either the *Group Registration Agreement/ Time Record* form or *Individual Volunteer Agreement/ Time Record* form.

**Agreement** See *Group Volunteer Registration Agreement/ Time Record* form or *Individual Volunteer Registration Agreement/ Time Record* form.

Signature of Minor Volunteer \_\_\_\_\_ Print Minor Name \_\_\_\_\_ Date \_\_\_\_\_

Signature of parent or guardian of Minor \_\_\_\_\_ Print Parent/Guardian Name \_\_\_\_\_ Date \_\_\_\_\_

- By initialing here \_\_\_\_\_, I hereby authorize and consent to the use of the minor's visual image by the State of Washington for appropriate purposes, including but not limited to: still photography, videotape, electronic and print publications, and websites. I give this consent with no claim for payment.

Signature of DNR Representative \_\_\_\_\_ Print DNR Rep Name \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*Attach this form to either *Group Volunteer Registration Agreement/ Time Record* form or *Individual Volunteer Registration Agreement/ Time Record* form that the minor participates in.