

NORTH CAROLINA DEPARTMENT OF NATURAL RESOURCES AND COMMUNITY DEVELOPMENT
DIVISION OF PARKS AND RECREATION
VOLUNTEER PROGRAM

PARENTAL APPROVAL FORM

Name of Volunteer _____

Parent or Guardian's Name _____

Address _____

Phone: (Home) _____ (Business) _____

I affirm that I am the parent/guardian of the above named volunteer. I understand that the Division of Parks and Recreation's VOLUNTEER program does not provide compensation and that the service will not confer on the volunteer the status of a State employee. I have read the attached description of the work that the volunteer will perform while serving as a

_____. (Position Title)

I give my permission for _____

to participate in this program sponsored by _____
(Name of Sponsoring Organization, if applicable)

at Eno River State Park From _____
(Name of Park or Office) (Date)

to _____
(Date)

(Signature)

(Date)