

**VOLUNTEER RELEASE FORM FOR MINORS (under the age of 18)
PARENTAL CONSENT REQUIRED**

Volunteer Name: _____

Check here if Volunteer is under age 18

Contact E-mail (required): _____

Parent or Legal Guardian Email (required if Volunteer is under age 18): _____

Address: _____

Phone: _____

Emergency Contact Name: _____

Relationship to Participant: _____

Phone Number: _____

Check here to receive the Heathcote Botanical Gardens Newsletter.

***VOLUNTEERS MUST COMPLETE THE WAIVER AND RELEASE FORM**

***PARENT/LEGAL GUARDIAN SIGNATURE IS REQUIRED IF VOLUNTEER IS UNDER AGE 18**

Please return to: Heathcote Botanical Gardens (info@heathcotebotanicalgardens.org), or turn the form in personally to:
Heathcote Botanical Gardens, 210 Savannah Rd., Fort Pierce, FL 34982
772-464-4672