



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

FOR MENTORS IN HIGH SCHOOL

Y Mentors Parent Release for High School Age Mentors

I give permission for my child, _____, to volunteer to be a Y Mentor through the YMCA of Barry County's Y Mentors program.

By signing this waiver, I understand:

1. The minimum participation is for 1 year, August – July.
2. During this time, my child will be serving as a mentor to an elementary student within the same school district as my child.
3. Involvement in this program will be under the guidance of the YMCA program personnel.
4. My child will be interviewed by the YMCA to screen and best match them to an elementary student.
5. My child is responsible for transportation to and from the mentoring site.
6. My child is NOT allowed to transport, babysit, arrange to personally meet his/her mentee in a one on one setting outside of mentoring sessions.
7. A background check will be performed on the local, state and federal level.
8. By signing this form, I acknowledge that my child has not been accused of, charged with, or convicted of any juvenile offenses including, but not limited to, injury to or misconduct with other children. My child is not currently on probation.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Printed Name: _____

Email: _____ Phone: _____