

Appendix XI

YOUTH VOLUNTEER PERMISSION LETTER

(Please Print)

Name of Youth Volunteer _____
(Please print full name)

Name of Parent/Guardian _____
(Please print full name)

Parish _____

Volunteer Role of the Youth _____

I am the parent/legal guardian of _____ and give my permission for him/her to be involved in volunteer ministry at the parish. My child and I are aware of and have reviewed the Responsible Ministry and Safe Environment Protocol of the Archdiocese of Halifax-Yarmouth. My child has received and signed the Covenant of Care (Appendix VIII a). We agree to conform to the requirements of that protocol.

Parent/Guardian Signature

Date

Youth Volunteer Signature

Date

Parent/Volunteer Address: _____

Phone: Home _____ Cell: _____

Parent/Guardian email _____