

## Volunteer Permission Slip (Volunteers Under Age 18)

I give my permission for \_\_\_\_\_ to participate as a volunteer at Night to Shine on February 13, 2026 at Northridge Church of Thomaston.

### Volunteer Information

DOB: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

Parent/Guardian (Phone): \_\_\_\_\_

Desired Volunteer Role: \_\_\_\_\_

Parent Printed Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

☐ I acknowledge that the signature above is my parent/guardian's signature. They have viewed this form and consented to my participation in the Night to Shine event.