

LATTITUDE.

CONSENT FORM FOR THOSE UNDER 18

VOLUNTEER'S NAME:

.....

HOME COUNTRY:

.....

PLACEMENT COUNTRY:

.....

If you are under 18 years of age at the time of paying your deposit, your parent or legal guardian must sign below.

I am the parent/guardian of the above named Volunteer. I confirm that I have read the Terms and Conditions and explained their meaning to the Volunteer. I undertake with Lattitude, for myself and the Volunteer, that the sum specified will be paid by the due date and that I will be responsible for ensuring that the Volunteer is adequately covered by insurance throughout the placement.

FULL NAME:

.....

SIGNATURE:

.....

DATE:

.....

RELATIONSHIP TO VOLUNTEER:

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Return this completed form to the Lattitude Canada Office:

Lattitude Global Volunteering
644 East 24th Avenue
Vancouver, B.C.
V5V 2A4

Phone: 604-569-3160
Fax: 604-569-3161