



Friendship Circle’s Code of Conduct

As a Parent of a special needs child of Friendship Circle:

- * I understand that Friendship Circle will match my child with a teenage/ young adult volunteer.
- * I understand that, it is necessary for me as parent(s)/guardian(s) to assume full oversight and supervision responsibilities with respect to all activities Friendship Circle’s assigned teen mentor(s) share(s) with my child in connection with his/her participation in the program.
- * I agree to respect the privacy of all participants of the Friendship Circle and to keep personal information confidential.
- * If someone gets hurt or some other detrimental incident occurs, it is my responsibility to immediately report the occurrence to Friendship Circle Staff.
- * **AS AN EXPRESS PRECONDITION OF YOUR CHILD’S ADMISSION INTO THE PROGRAM, THIS PARENTAL CONSENT FORM MUST BE SIGNED AND RETURNED TO THE FRIENDSHIP CIRCLE. EXECUTION OF THIS PARENTAL CONSENT FORM SERVES AS YOUR ACKNOWLEDGEMENT: (1) OF THE CRITICAL IMPORTANCE FRIENDSHIP CIRCLE PLACES ON YOUR AGREEMENT TO AT ALL TIMES HAVE AT LEAST ONE PARENT/GUARDIAN “ON PREMISES” DURING THE ENTIRETY OF EACH PROGRAM RELATED VISITATION; AND (2) THAT THE PARENT/GUARDIAN TAKES FULL RESPONSIBILITY FOR EVERYTHING THAT TRANSPIRES DURING THE VISIT AND EXEMPTS FRIENDSHIP CIRCLE FROM ANY RESPONSIBILITY; AND (3) THE FAILURE TO ABIDE BY THIS REQUIREMENT MAY, IN THE EXERCISE OF FRIENDSHIP CIRCLE’S SOLE AND ABSOLUTE DISCRETION, RESULT IN THE TERMINATION OF ALL FURTHER PROGRAM RELATED VISITATIONS WITH YOUR CHILD.**
- * I have carefully read agree to abide and be bound by all additional rules and policies in the Friendship Circle Handbooks and any additional rules pertinent to specific events.

For Parents or Guardian:

I grant the Friendship Circle permission to use my or my child’s name, image, likeness, or recording in connection with any promotional materials including, but not limited to, brochures, advertising, and broadcasts. I give my child permission to participate in Friendship Circle. I understand that participation in Friendship Circle activities involves a certain degree of risk and can be physically, mentally, and emotionally demanding. I have carefully considered the risk involved and give consent for myself or my child to participate in this activity. I also understand that participation in this activity is entirely voluntary and requires participants to abide by applicable rules and standards of conduct as set forth in the Friendship Circle Handbook, as it may be modified from time to time. I understand that this local Friendship Circle is an independent owned, operated and controlled. I, myself and on behalf of my child, release Friendship Circle and its employees, directors, officers and volunteers as well as all other organizations associated with Friendship Circle from any and all claims or liability arising out of this participation.

Parent/ Guardian’s Name: _____

Parent/ Guardian’s Signature: _____ Date: _____

Parent/ Guardian’s Name: _____

Parent/ Guardian’s Signature: _____ Date: _____