

Dear parent of a YMCA minor employee:

We have enclosed a copy of the YMCA Drug and Alcohol Use Policy. Please review this Policy carefully. Your child, as an employee of the YMCA, is subject to the Policy. He/she may be employed by the YMCA only if you and your child execute the respective consent forms below. If you have any questions about the Policy, your child's obligations under it, or your access to information gained pursuant to it, please call me at 503-221-5348.

DRUG AND ALCOHOL USE POLICY

PARENTAL CONSENT FORM

I acknowledge that I have received and read the YMCA's Drug and Alcohol Use Policy (the "Policy") dated February 18, 2004. I understand that my child, as an employee of the YMCA, is subject to the Policy. I hereby consent to testing of my child for drugs and/or alcohol pursuant to the Policy. I understand that while my child is under the age of 18, my child and I will have access to the results of any drug or alcohol testing performed pursuant to the Policy. I understand that I will not be given any further advance notice of testing, including, but not limited to, random drug testing. I understand that nothing contained in this consent form modifies the at-will status of my child's employment with the YMCA.

Signature of Parent of Minor Employee

Date

DRUG AND ALCOHOL USE POLICY

MINOR EMPLOYEE CONSENT FORM

I acknowledge that I have received and read the YMCA's Drug and Alcohol Use Policy (the "Policy") dated _____. I acknowledge that my parents will be given the results of any drug or alcohol testing performed pursuant to the Policy. I understand that nothing contained in this consent form modifies my at-will status of my employment with the YMCA.

Signature of Minor Employee

Date

Printed Name of Minor Employee

Heather Jackson
HR Manager
YMCA of Columbia-Willamette