

GRCA Volunteer Program Volunteer Work Day/Event Informed Consent Agreement, Liability Waiver and Assumption of Risk

Volunteer Work Day Event (hereinafter the "Event") : _____ Date: _

Date: _____

THE "VOLUNTEER SIGN IN FORM" IS A PART OF THIS DOCUMENT AND BY SIGNING YOU WILL WAIVE CERTAIN LEGAL RIGHTS. PLEASE READ CAREFULLY!

If you are under the age of 18 and will not be accompanied by a Parent or Guardian, please contact a GRCA staff person before participating.

As a "Volunteer Participant", I fully understand and agree to the following:

Volunteer Event terms and conditions:

- Volunteer events are subject to all Conservation Area rules and regulations, the GRCA's safety standards and other applicable policies.
- Volunteer Participants are required to attend site orientations and safety talks before the start of any planned activity or volunteer work.
- Volunteer Participants have the right to refuse work they believe to be unsafe.
- GRCA, solely or in partnership, agrees to provide volunteers, as much as possible, with a safe and accommodating volunteer work environment. The GRCA will provide volunteers with a site orientation, health and safety overviews, appropriate training or instruction, and appropriate safety equipment.
- Volunteer Participants are required to provide a minimum standard of safety equipment for themselves, including, but not limited to: appropriate clothing and footwear, sun hat, sun screen, bug repellent or other items required for being in the out-of-doors for an extended period.
- Volunteer Participants agree to report all personal injuries or property damage, no matter how slight, to the event supervisor.

Volunteer release, assumption of risk, waiver of liability, indemnity and consent to medical treatment

This Release is executed by the Volunteer Participant in favour of Grand River Conservation Authority (GRCA), its subsidiaries and affiliates and each of its respective officers, directors, employees and agents (herein after collectively known as the "Released Parties").

Assumption of Risk: Participation in the Event involves various risks including, but not limited to: inclement weather, physical labour, hand-tool use and walking over rough terrain in water or watercourses. I hereby acknowledge, understand and freely assume all such risks including the possibility of minor personal injury; serious personal injury; death; property loss; or, property damage resulting from my participation in the Event.



GRCA Volunteer Program Volunteer Work Day/Event

Informed Consent Agreement, Liability Waiver and Assumption of Risk

Consent to Medical Treatment: I hereby give permission to the Released Parties, or any one or more of them, to arrange for any first aid or emergency medical care including hospitalization and transportation if necessary, while participating in the Event. This authorization does not require a prior determination of a threat or danger of serious permanent injury. I take full responsibility for this authorization and agree to be responsible for all costs associated with medical care and transportation.

Release: I hereby release and forever discharge the Released Parties, or any one or more of them, from any and all actions, suits, fines, contracts, covenants, debts, claims and demands of whatsoever nature and kind, including without limitation, in whole or in part by the negligence of the Released Parties or otherwise, for damages, indemnity, costs, compensation or any other remedy which I or my successors, heirs, administrators or assigns may have for any claims of liability, personal injury, loss of life, property loss or property damage of any kind or nature, arising out of or sustained in the course of my participation in the Event.

Indemnity: I agree to hold harmless and indemnify the Released Parties, or any one or more of them, from any and all liability, loss, claims, demands, fines, damages, costs and expense, including reasonable legal fees, due to any personal injury or property damage to any third party arising out of or sustained in the course of my participation in the Event.

Authorization for Photo, Audio and/or Video Use and Release: I agree to grant permission for photos, audio and/or video recording (collectively, the "Recordings") of my participation in the Event for the sole purpose of promoting the GRCA. I consent to the display, publication and/or sharing of these Recordings, accompanied by my name, on any websites, social media channels, publications, reports, newsletters, brochures or other promotional material associated with the GRCA. I also consent to the filing of these Recordings (print or electronic) in a resource library for future use. In providing this consent, I acknowledge that these recordings may be edited, and may be widely circulated to the public in print or electronic form. I hereby waive any rights of compensation or ownership, and give full copyright of these photographs, audio and/or video to the GRCA.

BY PROVIDING MY NAME AND SIGNATURE ON THE 'VOLUNTEER SIGN IN FORM', I HAVE AGREED TO THE ABOVE ASSUMPTION OF RISK, CONSENT TO MEDICAL TREATMENT, RELEASE, INDEMNITY AND PHOTO/AUDIO/VIDEO RECORDINGS RELEASE. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT AND FULLY UNDERSTAND THAT I HAVE GIVEN UP CERTAIN RIGHTS. I HAVE HAD THE OPPORTUNITY TO ASK QUESTIONS AND HAVE THEM ANSWERED. I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

If the Volunteer Participant is under 18 years of age, the Volunteer Participant's parent or legal guardian is required to sign a separate form.



Description of "Event": _____ Date: _____

THE "VOLUNTEER SIGN IN" FORM IS A PART OF THE INFORMED CONSENT AGREEMENT AND BY SIGNING YOU WILL WAIVE CERTAIN LEGAL RIGHTS.

By providing your name and signature on the "Volunteer Sign-In" form - you ("The Volunteer/Participant") agree that you have read and agree to the Grand River Conservation Authority's ("GRCA") Informed Consent Agreement and Liability Waiver and Assumption of Risk. Where the Participant/Volunteer is under the age of eighteen (18) years it is also agreed to by the consenting parent or legal guardian of the Participant.

Signature of Participant/Guardian	Name of Participant (Print)	Date

GRCA respects the rights of individuals to the privacy of their personal information and is subject to the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA). The information collected here will not be made externally available for commercial purposes of any kind. Personal information will be used for internal administrative purposes, in the event of emergency, to contact participants as part of a post-event evaluation and/or may also be used to inform participants as to the availability of new programs or events. All information is kept strictly confidential and will only be used or disclosed in accordance with MFIPPA rules and regulations. Questions regarding the collection of this information should be directed to B. Buck, Volunteer Program Coordinator, GRCA, 400 Clyde Road, Box 729, Cambridge, ON, N1R 5W6.