



Individual Volunteer Form 2021

I _____, residing at _____ in the city of _____, in the province/territory of _____, postal code _____, hereinafter called the "Volunteer", do hereby endeavour to, with Her Majesty the Queen in Right of Canada, as represented by the Minister responsible for the Parks Canada Agency ("Parks Canada"), undertake the volunteer activity, on a voluntary basis, as more specifically described in the **Volunteer Activity Description Form** dated _____, attached hereto as Appendix "A" and forming part of this form, to the satisfaction of the Minister's officers in Parks Canada.

1. Volunteer e-mail _____
2. Phone number: _____
3. Mailing Address (if different from above). _____
4. Emergency contact name and telephone number: _____

5. No employer-employee relationship between Her Majesty and the Volunteer is created, contemplated or implied by this form.

6. The Volunteer may be reimbursed for out of pocket expenses for up to a maximum of \$0.00 under this form as set-out in Appendix "A".

7. Material, equipment or services to be provided by Her Majesty for the Volunteer's use under this form are described in Appendix "A". Materials or equipment may be provided in the following categories, as applicable to the volunteer activity:

- a. Use of materials that do not constitute a loan (e.g.: projector in a theatre);
- b. Informal loan (e.g.: binoculars or bicycle);
- c. Formal loan (material valued over \$1000 or borrowed for a longer period);
- d. Permission to drive or ride in a government vehicle.

8. The Volunteer will endeavour to complete the work set-out in Appendix "A".

9. Parks Canada provides a Group Personal Accident policy for volunteers who sign this form, covering most volunteer activities.* Parks Canada provides volunteers, excluding those who operate aircraft, with \$10,000,000 coverage for third-party (public) liability. Parks Canada will inform the Volunteer what additional insurance coverage, if any, they should carry during the volunteer activity.

** Exception: This does not cover volunteers 90 years of age or over.*

I have read and understood that Parks Canada insurance policy does not cover volunteers 90 years of age or over. Please initial _____



10. **Release of Publicity and Privacy Rights:** I agree to the use of my likeness or a representation of my likeness (such as sketches or photographic adaptations), in materials developed by or on behalf of Parks Canada, or licensed by Parks Canada, including posters, photographs, videos, films and multimedia products. I release Parks Canada and their licensees from all liability for any claim of infringement of publicity or privacy rights that I might otherwise have had in connection with the use of my likeness, or a representation of my likeness.

I also agree that my likeness or representations of my likeness may be exhibited, shown or reproduced in any media, whether in Canada or elsewhere.

I agree _____

I disagree _____

11. As part of the on-going evaluation of the National Volunteer Program, Parks Canada may send me a feedback survey that I will complete and return to Parks Canada.

I agree _____

I disagree _____

12. The volunteer activity described herein may be discontinued at any time at the discretion of Parks Canada and/or the Volunteer.

Signature of Volunteer

Date

Signature of parent / guardian if the Volunteer is under the age of majority *

Date

Signature of Parks Canada Agency Representative (Level 4 Delegation Authority Manager or its delegate)

Business Unit

* (18 years – Alberta , Manitoba, Ontario, Prince Edward Island, Quebec and Saskatchewan.)
(19 years – British Columbia, New Brunswick, Newfoundland and Labrador, Northwest Territories, Nova Scotia, Nunavut and Yukon.)

Your information is protected under the *Access to Information Act* and the *Privacy Act*. The personal information is only collected to administer the National Volunteer Program and will not to be used for any other purpose.