

Volunteer Registration Form

Town of Whitby

Community and Marketing Services Department

500 Victoria Street West Whitby, ON L1N 9G4

Phone 905.430.4310 Fax 905.668.5933 www.whitby.ca



Volunteer Information - please print clearly

Last Name		First Name	
Family Address			Apt./Unit #
City/Town	Postal Code		Email
Home Phone	Business Phone		Cell Phone

Emergency Contact Information - please print clearly

Last Name		First Name	
Family Address			Relation
City/Town	Postal Code		Email
Home Phone	Business Phone		Cell Phone

Informed Consent - To be completed by volunteer/applicant 18 years of age or older.

I authorize the Town of Whitby to collect personal information appropriate to the position and verify references to be provided upon request. I understand that I may be required to complete a criminal reference check and that all information obtained will be confidential but may be shared with relevant Town of Whitby employees in order to obtain an appropriate volunteer position.

Date (dd/mm/yyyy)	Volunteer Signature
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To be completed by a Parent or Guardian if the volunteer/applicant is between **14 and 18 years old**. Volunteers must be a minimum of 14 years of age at the start of the volunteer activity. I am the parent or legal guardian of the volunteer applicant. This person has not yet attained the age of 18 years, or will not have attained the age of 18 by the time of the volunteer activity and I hereby grant permission for the participant to serve as a volunteer.

Date (dd/mm/yyyy)	Parent/Guardian Signature
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Describe any medical condition which may limit the type of activity that you may undertake:

Describe any medication/precautions/dietary restrictions you may require to safely volunteer:

Volunteer Opportunities

Place a checkmark beside any volunteer opportunities that interest you. We will contact you to discuss specific job duties and provide an orientation session prior to your initial volunteer day.

Community and Marketing Services 905.430.4310		Planning Department-Downtown Development 905.430.4306	
<input type="checkbox"/>	Earth Day - April	<input type="checkbox"/>	Earth Hour - March
<input type="checkbox"/>	World Fest Whitby - May	<input type="checkbox"/>	Doors Open - May
<input type="checkbox"/>	Canada Day Celebrations - July	<input type="checkbox"/>	Whitby Heritage Day - September
<input type="checkbox"/>	Whitby Harbour Day - August	<input type="checkbox"/>	Brooklin's Harvest Festival - September
<input type="checkbox"/>	Whitby In Bloom - June and July	<input type="checkbox"/>	Brooklin's Christmas in the Village - November
<input type="checkbox"/>	Senior Services • Special events, driving a 9 passenger van, providing kitchen/administrative support.	<input type="checkbox"/>	Whitby's Holiday Celebration and Annual Tree Lighting - December
<input type="checkbox"/>	Other (Please Specify):		

Volunteer Waiver and Photo/Video Release

I hereby give permission for images of myself/my child, captured during special event activities through video, photo and digital camera, to be used solely for the purposes of the Town of Whitby promotional material and publications, and waive any rights of compensation or ownership thereto.

I acknowledge that I will provide services to the Town of Whitby on a volunteer basis. Reporting to the Event Supervisor/Co-ordinator or assigned Event Manager, the following are duties performed at events (including/but not limited to):

- Event set-up/tear down
- Tent set-up/dismantle
- Event participant aide
- Minor lifting/moving
- Event activity helper
- Flyer/information provider
- Ticket/monetary receiver
- Waste diversion
- Assisting Instructors
- Crowd control

I understand that in performing the above duties, I will not perform in any supervisory capacity or operate any machinery or equipment. I understand the foregoing services will be rendered without payment and will not be entitled to any benefits normally provided by the municipality. I will be responsible for my own health insurance. I agree to release and discharge the Town of Whitby from and against all claims and proceedings, in respect of any damage or injury sustained by myself arising of my provision of these services.

Volunteer Signature	Date (dd/mm/yyyy)	Parent/Guardian Signature (If volunteer is under 18):	Date (dd/mm/yyyy)

Personal information on this form is collected under the authority of Section 11 of the Municipal Act, SO 2001, c. 25 and will be used for registering to volunteer with the Town of Whitby. Questions regarding the collection of personal information should be directed to the Town of Whitby Records Manager , 575 Rossland Road East, Whitby, ON L1N 2M8.