



VOLUNTEER AGREEMENT

Please print except where signature is required

May 2015

Project/Program Name: _____

Volunteer's Name: _____ (hereinafter the Volunteer)

Volunteer's Mailing Address: _____

Volunteer's Phone Number(s): _____

Volunteer's Email Address: _____

Volunteer's Projected Hours for this Fiscal Year: _____

The Volunteer agrees with Her Majesty the Queen in the right of Alberta, as represented by the Minister of Environment and Parks (hereinafter the Department) to provide volunteer services according to the following terms and conditions.

1. The Volunteer will participate during the following time period (Start date required, completion date if applicable):

_____ The Department or the Volunteer may cancel this agreement at any time by notifying the other party.

2. The Volunteer shall comply with the Department's policies and procedures, and will learn and strictly observe any guidelines at (park, district, region):

3. The Volunteer agrees to make personal safety a top priority and to promptly tell the Department's Representative about unsafe conditions or conduct that may come to the Volunteer's attention. If the Volunteer is involved in an accident, is injured or becomes ill while performing authorized duties, the Volunteer is required to record all details and immediately inform the Department's Representative.

4. If the Volunteer becomes injured or ill while performing authorized duties, the Volunteer is provided Worker's Compensation Coverage by Deeming Order to receive compensation benefits for compensable injuries. In exchange for this coverage, The Volunteer resigns their right to take legal action against the Department, any other employer or any other worker covered under the *Alberta Workers' Compensation Act*.

5. The Volunteer is covered under the Government's Comprehensive General Liability insurance policy, subject to the terms and conditions of the policy at the time of the loss. Such coverage will only apply while the Volunteer is performing authorized duties.

6. Anything, other than expended materials, provided by the Department for the Volunteer's use under this agreement shall be returned to the Department's Representative upon completion of the services, or as required.

7. The Volunteer shall obtain prior written permission from the Department's Representative before storing personal items on Department property.

8. The Department is not responsible for any damage to or loss of the Volunteer's personal property incurred while performing volunteer duties or while stored on Department property.

9. The Volunteer shall obtain prior approval from the Department's Representative before operating any vehicle or mobile equipment owned or leased by the Department. The Department's Representative will ensure compliance with the Department's vehicle use policies prior to granting the Volunteer permission to operate a Department vehicle. The Volunteer shall not operate a marked enforcement patrol vehicle.

10. The Volunteer, if under 18 years of age, must have a parent or legal guardian sign this agreement.

11. Products developed by the Volunteer under this agreement are the property of the Department.

12. The Volunteer agrees to not disclose confidential information without proper authorization from the Department's Representative.

13. Without charge or notice, the Volunteer agrees that the Department may use audio, video or photography of the Volunteer, arising from the Volunteer's service.

14. Specifics (if any) related to the volunteer project/program are contained in the attached schedule(s).

15. The Department's Representative for this agreement is:

Name _____ Phone number _____

Volunteer Signature _____ **Date** _____
(Volunteer signs first)

Dept. Rep. Signature _____ **Date** _____
(Department's Representative signs last)

I consent to this child volunteering with the Department, pursuant to the above stated terms and conditions. (Only required if the Volunteer is under the age of 18).

Parent/Guardian Signature _____ **Date** _____
(Parent or Legal Guardian signs second if required)

TERMINATION OF AGREEMENT

Date Agreement terminated: _____
(Date) (Department Representative's Signature)

