VOLUNTEER WAIVER FORM

This form is intended to assure you of our deep appreciation of your services and to indicate our commitment to do the very best we can to make your volunteer experience a productive and rewarding one.

I , of , Nova Scotia agree to serve as a volunteer for the Department of Natural Resources as more particularly outlined in Schedule "A".

DEPARTMENT OF NATURAL RESOURCES

The Nova Scotia Department of Natural Resources will provide adequate information, training and assistance to ensure that the duties described in the attached program description can be done, and will provide the supplies and equipment necessary to accomplish assigned duties. The Department will ensure reliable supervision and provide feedback on performance while respecting the skills, dignity and individual needs of the volunteer, and do its best to adjust to these individual requirements. The Department encourages the contribution of and is receptive to any comments from the volunteer regarding ways in which it might better accomplish its tasks. The volunteer will be treated as part of the team but must understand that time as a volunteer at the Provincial Wildlife Park does not give entitlement to preferential treatment nor assurances of future employment.

VOLUNTEER

As a Volunteer, I agree to perform duties as described in the attached program description to the best of my ability and to adhere to agency rules and procedures, including record-keeping requirements and confidentiality of agency and client information. I agree to comply with any direction or request made by supervisory staff of the Department of Natural Resources which relates to the program outlined in Schedule "A" and to meet time and duty commitments. I will give all Nova Scotia Department of Natural Resource's property appropriate care, but will not be responsible for breakage in normal use and will return all property at the end of the term. If I choose to bring any personal tools, supplies or equipment, or those belonging to anyone else, to the volunteer function, I do so at my own risk. The Department is not required to repair or replace any item used, lost, stolen, broken or otherwise damaged or missing. I will limit my activities to those described in the attached program and will not exceed those duties. I will act in a professional manner in discharging my duties and in meeting members of the public. I understand that I may refuse to perform any activity which I feel is a danger to me, is beyond my capability, or where I may cause injury to others. I understand that the Department may advise me at any time that the voluntary services described herein are not required, whether or not there is cause.

WAIVER OF CLAIM

As a condition of my acceptance by the Department of Natural Resources, as a Volunteer, I ______, for myself, my heirs, executors, administrators and assigns, waive any claim for any loss as a result of injury to or loss of my property (including animals) or damage or injury to myself (including death), and release Her Majesty the Queen, in right of the Province of Nova Scotia, its agents, servants and employees, from any claims, demands, damages, actions or causes of action arising out of or as a consequence of any such loss, injury or damage to my person or property (including animals), incurred while participating as volunteer for the Department of Natural Resources, regardless of whether such loss, injury or damage may arise from the negligence of the Department of Natural Resources, its servants, agents, or employees.

ASSUMPTION OF RISK

I understand that I am a volunteer, not an employee, and that I will not receive any compensation from the Department of Natural Resources. I understand that neither the Department of Natural Resources nor the Province of Nova Scotia provide any form of accident, health or medical insurance or liability insurance. If I feel that I require any form of insurance coverage for any thing arising from this volunteer function, I will make all necessary arrangements at my own cost and based on my own personal needs as I decide those needs to be relevant. I further state that I am in proper physical condition to participate in this volunteer function and am aware that participation could, in some circumstances, result in physical injury or property loss or damage. I agree to assume all risk for injuries to myself or my property (including animals) that may result from my volunteer work for the Department of Natural Resources, and acknowledge that no representations as to the conditions, nature or hazards of this volunteer work have been made to me by the Province of Nova Scotia, its servants, agents and employees.

INDEMNITY

I further agree to indemnify the Province of Nova Scotia, its servants, agents and employees from any claims and demands which may be made against the Province of Nova Scotia, its servants, agents and employees arising out of or in consequence of my attendance at or performance of this volunteer function.

ACKNOWLEDGEMENT OF PARTICIPANT

By signing this Document, I acknowledge having read and agreed to the above and that I have attained the age of sixteen (16). I will also provide the Manager Provincial Wildlife Park with a recent (less then six months ago) copy of my Criminal Record.

Signature of Volunteer		_	
Name of Volunt	reer (Please Print)	_	
Street	City	Province	
Postal Code		Telephone	
Date			
VOLUNTEER A	<u>ACCEPTANCE</u>		
•	_	sed the job details and pertinent safety regulations was fer to become a member of our team.	ith the above
		Manager Provincial Wildlife Parks	