

NIAGARA FALLS VOLUNTEER INFORMATION PROFILE



Name: _____

Date: _____

Address: _____

Postal Code: _____

Phone: _____

Fax: _____

E-Mail: _____

Health Card #: _____

Emergency Contact: _____

Emergency Phone: _____

School _____

Phone: _____

Age Group:

- Under 13 years 14 - 18 years 19 - 30 years 31 - 50 years Over 51 years
Do you have: Smart Serve First Aid Driver's License

I am interested in assisting in for both Canada Day & the Santa Claus Parade!

CANADA DAY (Sunday, July 1, 2012):

- Parade Set-Up/Staging (7am - 11am)
- Parking (7am - 12:30pm)
- Carry Parade Banners (8am - 11am)
- Carry Parade Signs (8am - 11am)
- Event Evaluation (11am - 1:30pm)
- Green Team (10am - 3pm)
- Miscellaneous Duties (9am - 5pm)
- Set Up at Optimist Park (8am - 11:30am)
- Tear Down at Optimist Park (3pm - 6pm)

SANTA PARADE: (Sat., Nov. 17, 2012)

- Parade Set-Up/Staging (7am - 11am)
- Parking (8am - 11am)
- Carry Parade Banners or Signs (10am - 12:30pm)
- Parade Marshall (10am - 12:30pm)
- Parade Costume (9am - 12:30pm)
- Hot Chocolate Area (10am - 12:30pm)
- Event Evaluation (11am-1:30pm)
- Santa Meet & Greet (11am - 3pm)
- Miscellaneous Duties (8am - 2pm)

Please note, we will do our best to schedule you in the area of your first preference.

RELEASE OF LIABILITY AND MEDIA CONSENT

Undertaking to act in a responsible and safe manner – I hereby undertake and agree to act in a responsible and safe manner at all times while acting as a volunteer.

Release of Liability: I hereby release and forever discharge The Corporation of the City of Niagara Falls, its officers and employees from any and all actions, causes of actions, claims and demands, for damages, loss, injury, or obligations or liabilities of any kind which heretofore may have been or may hereafter be sustained to any persons or property arising out of or connected with participating in this event.

Media Consent – I hereby grant to the City of Niagara Falls and persons acting on its behalf the unrestricted and perpetual right and permission, in respect of pictures or film footage that it, through its photographers and/or contractors, has taken of me or in which I may be included with others, to use, to publish, to broadcast and to authorize a third party to use, publish or broadcast the same in whole or in part, in any and all media now or hereafter known, for the purpose of promoting volunteerism and/or the City of Niagara Falls.

Signature

Signature of parent or guardian (if volunteer is under age 18)

Please Print Name

Please Print Name

Date: _____

Relationship to Volunteer

Please return this form to The City of Niagara Falls NO later than June 1, 2012 to:

The City of Niagara Falls, Recreation & Culture Office, MacBain Community Centre, 7150 Montrose Road, Unit 1
Niagara Falls, ON L2H 3N3; Phone: 905-356-7521, Ext. 3330; Fax: 905-356-7404; Email: lalbanese@niagarafalls.ca