

ALBERTA WILDERNESS ASSOCIATION



VOLUNTEER APPLICATION FORM

AWA is fortunate to have volunteers in every corner of the province. We are pleased you are interested in joining this team. Please complete the following information.

Full Name: _____

Street Address: _____

City: _____ Postal Code: _____

Telephone: _____ Email: _____

Volunteer Waiver of Liability Statement

In consideration of the acceptance of my application as a volunteer for the Climb and Run for Wilderness and all related events at the Calgary Tower, I, for myself, my heirs, executors, administrators, successors and assigns, hereby, waive and forever discharge Alberta Wilderness Association, Palliser Square Properties Ltd., Calgary Tower Facilities Ltd., Aspen Property Management Ltd., and all other associations, sanctioning bodies and sponsoring companies, and all the respective subsidiaries, agents, officials, servants, contractors, representatives, elected and appointed officials, successors, and assigns, of and from all claims, demands, damages, cost, expenses, action, whether in law, equity, in respect of death, injury, loss, or damage to my person, or property howsoever caused, arising or to arise by reason of my participation in the said event, whether as a participant or otherwise, whether prior to, during, or subsequent to the event and notwithstanding that same may have been contributed to or occasioned by the negligence of any of the aforesaid. I further hereby undertake to hold and save harmless and agree to indemnify all the aforesaid from and against all liability incurred, by any or all of them arising as a result of, or in any way connected with, my participation in the said event.

Name

Signature

Date

Confidentiality Undertaking

I understand that AWA considers the personal information it maintains on staff, donors board members and friends to be confidential and subject to privacy provisions. I understand that all confidential information provided to me in the course of my duties as a volunteer of AWA is to be used solely for the purpose of performing my duties related to the AWA. I agree to protect the confidentiality and physical security of the confidential information I have received and the privacy of those to whom it pertains and to use it only for the purpose for which I have been granted access. I will not communicate either orally or in writing, any confidential information or any materials or data resulting from my work as an AWA volunteer in any capacity, including that which I have become aware of in the course of my tenure with the Association. I further understand that non-compliance could result in action by the association. I agree to return any and all such information including confidential information or any materials or data resulting from my work as a volunteer to the custody of the Executive Director upon completion of my tenure with AWA.

Name

Signature

Date

