

VOLUNTEER INFORMATION FORM

The Essex Region Conservation For support of the Essex Region Conser an 8-12 person Board of Directors Co-ordinator.	vation Authority. T	he Foundation is a	registered cha	aritable organization governed by	
The Foundation is looking for volun assistance to staff. With your help, v			-	• .	
O Fund-raising	O Event-planning	O Administration	O Donor/i	Member Services	
If you have some talent in any of the We will contact you for an interview		•	•	plete the form and return it to us.	
Name:					
Address:					
City:	Postal Code:				
Home Phone:	Cell Phone:	Е	mail:		
I prefer to be contacted by	□ e-mail	☐ Home phone	□ Cell pho	one	
Please check any or all of the activities that may interest you:					
□ Special event planning	□ Fundraising	campaign developn	nent	□ Photography/Videographer	
□ Helping at special events	□ Visiting dor	ors to discuss plann	ed giving	□ Other:	
□ Attending information booths	□ Nature hike	e leader		_	
□ Speaking to service clubs	□ Office worl	k, telephone assistar	nce	-	

Please use this space to tell us about your related interests and experience, or other skills that you would be willing to share with us:					
Volunteer Agreement					
At all times, the mission, vision and philosophy of the Foundation will be followed in accordance with the Foundation's policies, standards and guidelines. As a volunteer of the Essex Region Conservation Foundation, I may have access to information and documents related to donors, volunteers and staff that are private and confidential in nature; reasonable care and caution will be exercised to protect and maintain total confidentiality.					
By volunteering at a Foundation event, I grant permission to the Foundation to photograph and videotape me for the Foundation's purposes in any media and territory in perpetuity. I waive and release any and all claims for myself, my heirs, executors and administrators against the Essex Region Conservation Foundation, its agents, employees, and licensees and any sponsor, officials, volunteers and organizers of the event in conjunction with any injury, illness, death, loss or damage to property, which may directly or indirectly result from my volunteer involvement in this event, and any claim arising in connection with photographs or videotapes of me. I acknowledge that I will not receive any financial remuneration for any of the above and that my compensation is the opportunity to volunteer for the event and contribute to the activities of the Essex Region Conservation Foundation. If the volunteer is under 18 years of age then parent / guardian must sign this Agreement on the volunteer's behalf.					
All of the information that I have submitted on this form is true and correct. I acknowledge that all information submitted on this application will be considered confidential. By singing below, you agree and have read this waiver and understand and accept its terms.					
Volunteer Signature Date					
www.ourgreenlegacy.org					
For more information contact Susanne Tomkins 519 776 5209 x366 – stomkins@erca.org					
Essex Region Conservation Foundation, 360 Fairview Avenue West, Suite 311, Essex, ON N8M 1Y6					
Thank you for your support!					