

Name _____

Phone number _____ Alternate number _____

Address _____
Street and number City Province Postal code

Would you prefer contact through e-mail? no yes ► e-mail address _____

Would you like to be contacted again next year? no yes

Age over 18 16 to 18 12 – 15 11 and under ► must be accompanied by a responsible adult

Check () your volunteer area.

- | | |
|---|--|
| <input type="checkbox"/> photographer | <input type="checkbox"/> volunteer reception assistant |
| <input type="checkbox"/> petting zoo assistant | <input type="checkbox"/> host/information attendant |
| <input type="checkbox"/> meal prep and distribution | <input type="checkbox"/> security |
| <input type="checkbox"/> climbing wall/eurobungee assistant | <input type="checkbox"/> waxed hands |
| <input type="checkbox"/> set up/tear down assistant | <input type="checkbox"/> wagon ride assistant |
| <input type="checkbox"/> inflatable assistant | <input type="checkbox"/> pony ride assistant |
| <input type="checkbox"/> game assistant for family picnic games | <input type="checkbox"/> canoe rides |
| <input type="checkbox"/> entertainment host (take care of stage entertainers) | |
| <input type="checkbox"/> ticket seller and taker (specify activity) _____ | |
| <input type="checkbox"/> PlayDay helper (specify activity) _____ | |
| <input type="checkbox"/> ride helper (specify activity) _____ | |
| <input type="checkbox"/> other (please specify) _____ | |

Check all times available anytime morning afternoon evening

Commitment

I understand that Strathcona County will be providing an orientation (information) session, access to a volunteer coordinator and a t-shirt to acknowledge those volunteers who commit a minimum of four hours to the event.

As a volunteer I agree to

- fulfill my time and duty commitments (including attendance at the orientation);
- report to the volunteer reception area 15 minutes prior to my scheduled shift;
- represent the County in a friendly, courteous manner when dealing with staff, the public and other volunteers; and
- wear the festival t-shirt while on shift.

Volunteer – signature _____ Date _____

Collection and use of personal information

Personal information is being collected in accordance with the *Municipal Government Act* and is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. It will be used to facilitate and coordinate our Canada Day Volunteer Program. If you have any questions about the collection and use of your information, contact the Coordinator, Central Services, Recreation, Parks and Culture, 780-467-2211.