

Name _____

Phone number _____ Alternate number _____

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

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

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

City _____

Postal code _____

Commitment

I understand that Strathcona County will be providing information, access to a volunteer coordinator and an appreciation gift 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 30 minutes prior to my scheduled shift; and
- represent the County in a friendly, courteous manner when dealing with staff, the public and other volunteers.

Volunteer – signature

Date

Collection and use of personal information

Personal information is being collected in accordance with the *Municipal Government Act (S.3) The Freedom of Information and Protection of Privacy Act (S. 33)* and is protected by this Act. It will be used to facilitate and coordinate our Recreation for Life Walk/Run 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.

Visit us at www.strathcona.ab.ca