



KidSport Alberta
 PO Box 36107 Lakeview RPO
 Calgary, AB T3E 7C6

KidSport Volunteer Agreement

First Name:		Last Name:	
Employer:	Phone.: ()	Cell: ()	
Email:			
Mailing Address:		We want to celebrate you!	
		Birthdate: (MM/DD/YY) / /	
		Year Optional*	
Chapter:		First Year with KidSport:	
Why do you want to volunteer with KidSport? _____			
Are you a Canadian Citizen or Landed Immigrant? YES / NO			
Do you have a medical condition or disability that we should be aware of? YES / NO If yes, please explain and provide emergency contact information _____			
Emergency Contact:		Contact Number: ()	
Would you be willing to drive your vehicle as part of your volunteer assignment? YES / NO			
Do you have previous volunteer experience? YES / NO What organization did you help?			
Have you had any criminal conviction for which a pardon has NOT been granted? YES / NO (Security reference check will be conducted as required.)			
PLEASE READ CAREFULLY			
<ul style="list-style-type: none"> • I acknowledge and hereby irrevocably authorize that, in the event of me being physically, bodily injured during any of my activities as a KidSport Society of Alberta (hereinafter KidSport) volunteer, KidSport shall be permitted to obtain copies of any of my relevant health records as it may request. I shall execute any authorization for Release of Health Records as KidSport considers necessary, and my failure to do so will result in the automatic suspension of any claim I may have. A claim will automatically terminate if I rescind a release. • I hereby certify that I will make known to KidSport any Criminal Record (other than Traffic Violations) and the details of such conviction(s). Crimes for which official pardons have been granted pursuant to the Criminal Records Act R.S.C. 1970 need not be disclosed. • I hereby give my permission to KidSport to use my photo when necessary for the purpose of KidSport. • I hereby release KidSport from all responsibility that may occur as a result of my personal use of an automobile when volunteering for KidSport activities. • I agree to carry out my assigned volunteer tasks in a reasonable and safe manner. • I am aware of the KidSport policy that breach of confidentiality with respect to KidSport Applicants, donors and sponsors will result in an immediate request for my resignation. • I am aware that if my behavior while on the board is found to be questionable or inappropriate by the majority of the board members, I will be given a verbal warning. Should the behavior persist I will be provided a written warning followed by a request for my resignation. • I am aware that any events that I am involved in planning or implementing must be done with safety precautions in place and handled with due care. • The personal information on this form will only be collected and shared under the authority of the Freedom of Information and Protection of Privacy Act (FOIP) of the Province of Alberta, Section 32(c) and 33(1) (b2) and the Canadian Immigration Act Section 96.1-3. The purpose of collecting this information includes: determining eligibility for volunteer opportunities, programs, services, and recognition, to facilitate your registration process, to administer and evaluate our volunteers and programs, statistical purposes and to activate the Volunteer Accident Insurance coverage. This information may be shared with other volunteers and volunteers' supervisory staff. 			

Name of Volunteer: _____ **Signature of Volunteer:** _____

Name of Witness: _____ **Signature of Witness:** _____

Date: (MM/DD/YY) / / **Signature of Parent/Legal Guardian (if under 18):** : _____

Shirt Size (please circle): Men's: S, M, L, XL, XXL, 3XL, 4XL OR Ladies: XS, S, M, L, XL, XXL



So ALL Kids Can Play!



kidsport.ca