



Ganaraska Region Conservation Authority
Ganaraska Forest Trail Maintenance (GFTM)
Volunteer Opportunity Application Form

CONTACT INFORMATION PLEASE PRINT CLEARLY

First and Last Name	Email Address	
Address	City	Postal Code
Check One: <input type="checkbox"/> Adult (18 years of age and over) <input type="checkbox"/> Youth (16 or 17 years of age)	Home Phone	Cell Phone
My familiarity of the Ganaraska Forest trails is: <input type="checkbox"/> very familiar <input type="checkbox"/> somewhat familiar <input type="checkbox"/> not at all familiar		

AVAILABILITY

During which hours are you available for volunteer assignments? (Please check as many as apply)
 Please also indicate number of hours per week. # of hours per week? _____

<input type="checkbox"/> Weekday Mornings (8:30 am – 12:00 pm)	<input type="checkbox"/> Weekend Mornings (8:30 am – 12:00 pm)
<input type="checkbox"/> Weekday Afternoons (12:00 pm – 4:30 pm)	<input type="checkbox"/> Weekend Afternoons (12:00 pm – 4:30 pm)

I am applying with other individuals with the intent to work as a team:

Name 1 _____ Name 2 _____ Name 3 _____

I would need to be introduced to another approved volunteer.

PREVIOUS VOLUNTEER EXPERIENCE

Please summarize your previous volunteer experience directly related to the tasks of this opportunity.

Objective:

To engage volunteers, over 16 years of age, working in groups of two or three, in the GFTM Volunteer Opportunity. Persons under the age of 18 must have a guardian present to participate. The guardian must also be a volunteer. All volunteers must wear applicable personal protective equipment (listed below). Following mandatory training and supervised practice session, volunteers will then work unsupervised with other trained volunteers in groups of two or three together to complete the following objectives:

- Remove tree debris such as branches and cut logs from the trail surface.
- Identify and record trail blockages using web based applications.
- Remove trail blockages less than one meter high from the trail surface and less than 15 cm in diameter.

Please Note:

1. Chainsaws **CANNOT** be utilized to remove a blockage
2. Work is to be done on foot
3. Areas of the Ganaraska Forest where this volunteer work may occur, may be areas that have **NOT** been inspected or deemed safe by GRCA staff prior to your entry

Responsibilities:

1. Hike on Ganaraska Forest trails and remove small debris:
 - a. When debris (rocks, branches, small logs) are encountered on a trail, remove the debris from the trail surface to a distance of 1.5 meters beyond the trail surface.
2. Hike on Ganaraska Forest trails and when a trail blockage is encountered follow one of two options listed below:
 - a. The blockage **may be removed** only if the blockage is:
 - i. A partial blockage (e.g., top of a tree) where the entire blockage is less than 1 meter high from the trail surface and less than 15 cm in diameter.
 - ii. A single tree where the entire tree is less than 1 meter high from the trail surface and less than 10 cm in diameter.
 - b. **DO NOT remove the blockage if the blockage is:**
 - i. More than 1 meter high from the trail surface and more than 15 cm in diameter.
 - ii. Multiple trees across a trail in one location (e.g., many individual trees down across the width of the trail and along a given trail length).
 - iii. Major trail blockage from blowdown (e.g., many trees down in a mass in which the trail can no longer be seen, and the damage extends from the edge of the trail into the Forest – blowdown).
 - iv. Trail is damaged (e.g., exposed root ball).

3. Record trail blockages on web based applications, using your own personal device when:
 - a. A volunteer removes a blockage.
 - b. A volunteer is unable to remove a blockage.
 - c. A volunteer is prohibited to remove the blockage.

Abilities:

1. Familiarity with the Ganaraska Forest trail network.
2. Able to hike 2 to 12 kilometres of recreational trail, which is diverse in terrain (trail width, slope, tread conditions).
3. Able to hike in all seasonal conditions while wearing required valid personal protective equipment and carrying equipment.
4. Able to lift and move up to 50 pounds.
5. Able to use tree cutting tools other than a chainsaw.
6. Able to use web based applications on personal devices.
7. Have another approved volunteer undertake these tasks with you.

EQUIPMENT & MATERIALS REQUIRED

1. **Personal Protective Equipment (PPE)**
 - a. Volunteer must provide valid PPE and wear at all times:
 - i. CSA approved boot, gloves, type 2 class E hard hat, safety glasses or goggles, hi-vis safety vest.
 - ii. Long pants.
 - b. Volunteer must wear weather appropriate clothing
2. **Equipment**
 - a. Volunteer must supply:
 - i. A cellular device (does not require cellular data) to:
 1. Record information
 2. Track their location on a mapping web application
 3. Communicate with others including 911.
 4. Use What 3 Words application to support emergency services
 - ii. Tree cutting devices other than a chainsaw to remove trail blockages.
3. Volunteers should have water and food available and first aid kit, before heading out on trails

TASK HAZARDS

Possible hazards to be aware of while performing this volunteer activity, including, but not limited to:

- Unseen trip hazards and uneven ground conditions given potential trail conditions
- Unstable tree conditions (spring poles, hangers, unstable root ball or pileup of trees, rolling trees)
- Walking around a partial or full (single) tree blockage.
- Weather conditions and trail conditions caused by various types of weather
- Eye pokes, struck by (other trail users)
- Injury from cutting device
- Physical exertion
- Communication: insufficient cellular service, drained cellular battery
- Poison ivy and ticks

PERSONAL REFERENCES

Please list two personal references that you give your consent for us to contact by phone to provide information related to your volunteer activities:

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

PERSON TO NOTIFY IN CASE OF EMERGENCY

Name:	Relationship:
Home Phone:	Cell Phone:



Vision Statement: **Clean water healthy land for healthy communities.**

Mission Statement: **To enhance and conserve across the Ganaraska Region Watershed by serving, educating, informing and engaging.**

RELEASE, WAIVER, ASSUMPTION OF RISKS AGREEMENT AND SIGNATURE (Please note your understanding & agreement by checking all boxes)

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may disqualify me from further consideration as a volunteer.

I UNDERSTAND, as a volunteer for Ganaraska Region Conservation Authority (GRCA), it is the responsibility of me to:

- 1. **ENSURE I UNDERSTAND** that I am participating in the GFTM Volunteer Opportunity as a volunteer and not as an employee or providing employment services to the GRCA. If I am currently a GRCA employee, I understand and agree that I am participating in the GFTM freely as a volunteer, on my personal time, and not as a condition or extension of my employment;
- 2. **ENSURE I UNDERSTAND** that as a volunteer, I will not, either now or in the future, receive any financial remuneration, salary, wage, payment or any employee benefit whatsoever, or be covered by Workplace Safety and Insurance benefits through the GRCA. If I am being covered by another organization for insurance liability and/or WSIB coverage, **ENSURE I FORWARD** proof of coverage to GRCA, prior to beginning any event or activity;
- 3. **ENSURE I UNDERSTAND** that once I am an approved volunteer for GRCA and while I am undertaking my volunteer work, I will be covered under GRCA's group accident insurance policy, subject to all the exclusions, limitations and provisions of the policy. Such coverage will only apply while you are performing the expressly directed duties as outlined by the GRCA. GRCA is not responsible for damage to, or loss of personal property incurred while participating in the volunteer event;
- 4. **ENSURE I UNDERSTAND AND AGREE** to waive, release and indemnify, and keep indemnified, the GRCA and its employees, agents and assigns for any and all claims for personal injury or death and/or property damage that may arise from or be in any way connected to my participation as a volunteer for the GRCA. I understand that this release applies to both present and future injuries and that it binds my heirs, executors and administrators;
- 5. **ENSURE I UNDERSTAND** and follow all task-specific rules and guidelines, as outlined in a safety and task training session given prior to any work beginning. Abide by all risk assessments, health and safety regulations, and ask for clarification on any duties, responsibilities, or safety requirements that are not clear to me. **ALSO, ENSURE I UNDERSTAND** that I have the right to refuse any unsafe work that may be asked of me;
- 6. **ENSURE I UNDERSTAND AND ACKNOWLEDGE** that I am aware that there are risks associated with the volunteer work described above that I will be required to perform. I understand that these risks are mentioned above and will also be explained to me by the GRCA, and that they also include, but are not limited to:
 - 1. The risks associated with travel to and from locations where my duties will be performed including transport on foot or by private motor vehicle, truck, ATV or other alternate transportation;
 - 2. Theft, vandalism or loss or damage to my personal property;
 - 3. Any manner of physical or mental injury (including death) that could result from carrying out my volunteer work.
 I freely accept and fully assume all such risks, dangers and hazards and the possibility of personal injury, death, permanent disability, property damage or loss resulting thereof.
- 7. **ENSURE I SUPPLY** GRCA with any copies of proof of qualified training or certification, if required to use specialized equipment while performing your volunteer duties prior to any work beginning;
- 8. **ENSURE I HAVE AND USE** valid personal protective equipment and any other equipment that is outlined as being required in the volunteer opportunity prior to any training session or work beginning;
- 9. **ENSURE** that all data collected and material prepared by me while participating in the GFTM, including copyright therein, shall become the sole property of the GRCA and be returned to the GRCA. I waive any moral rights I may have with respect to all data collected and material prepared pursuant to this Agreement in favour of the GRCA and any of its assignees and licensees;
- 10. **ENSURE I UNDERSTAND** that the GRCA is committed to protecting the privacy of personal information in its possession and that this information will be kept strictly for the use of the GRCA. I agree to respect the confidentiality of all information I may have access to at the GRCA;
- 11. **ENSURE I ALSO CONSENT** to photographs, electronic and/or video images to recognize my participation in and promote the GRCA in any broadcast, telecast and/or written account of any related event at which I am a volunteer. **IF YOU DO NOT CONSENT** to photographs, electronic and/or video images it is your responsibility to please identify such to GRCA;
- 12. **ENSURE** I treat everyone with respect and dignity at all times while performing my volunteer work; and
- 13. **ENSURE** that I am at least eighteen years of age, fully competent to sign this Agreement, or I am sixteen or seventeen years of age and will be volunteering with a parent or legal guardian, and they will sign this Agreement.

ACKNOWLEDGEMENT- PLEASE READ CAREFULLY!

By submitting and signing this **VOLUNTEER APPLICATION FORM** to the **GRCA**, I **ACKNOWLEDGE** that I have carefully read, fully understand, and agree to abide by the terms outlined above.

Initial:

Signatures will be collected during training session

Name (Print) Signature Date

Parent/Legal Guardian Acknowledgement & Consent (if under 18 years old):

I, _____, am the parent/legal guardian of _____. I have carefully read, fully understand, and agree to the above terms outlined in this document, and I give my permission for him/her to participate with the GRCA.

Signature of Parent/Legal Guardian Date

Application forms can be emailed to volunteer@grca.on.ca or faxed to 905-885-9824 (Attention: Conservation Lands Coordinator).
For additional information contact 905-885-8173.

OFFICE USE ONLY

Training Session Completed Date:	Volunteer Accepted Date:
---	---------------------------------