

Office Use Only Date Received_

Ву_

630 CHED Santas Anonymous - VOLUNTEER APPLICATION

780- 428-8697 www.santasanonymous.ca

e you 16 years or older? YES: NO: [Alternate Phone:
e you 16 years or older? YES: NO: [
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dross	
diessCity	: Postal Code:
	s Anonymous to periodically send volunteer communications, at to Santas Anonymous to the given address. Santas Anonymous does es.
arehouse is open starting mid-November.	
PLEASE PRINT and bring in on the first	day you volunteer.
In consideration of being permitted to volunteer with related events and activities, on behalf of myself, successor or assign; (1) I ACKNOWLEDGE, UNDERSTAND, DECLARE AN (a) To the best of my knowledge, I am in Good Phiparticipating/volunteering in activities related to Cl (b) Participating/volunteering or assisting others in INJURY TO ME, INCLUDING DEATH, LOSS OR result not only from my own actions, inaction or new or the conditions of the premises or of any equipming (c) There may be OTHER RISKS not known or not continuously to the premise of the premise of the premise or of any equipming (c) There may be OTHER RISKS not known or not continuously to the premise or of the premise of the	rysical Condition and have no disease or injury that would be aggravated by HED Santas Anonymous; in participating/volunteering in CHED Santas Anonymous may involve RISK OF DAMAGE TO ME OR MY PROPERTY, or other consequences, which might regigence but also the actions, inaction or negligence of others, the rules of play tent used; of reasonably foreseeable; and Understanding All of the Above, EASE, WAIVE, DISCHARGE, HOLD HARMLESS, INDEMNIFY AND conton, Corus Entertainment Inc, employees or volunteers, affiliated with the the respective administrators, officers, directors, agents, employees, volunteers cantas Anonymous; on, or related companies or businesses, other participants, participating or s, international organizations, agencies, sponsors, or advertisers, the respective conduct the 630 CHED Santas Anonymous program FROM ANY AND ALL DSS OR DAMAGE TO PERSON OR PROPERTY, OR ANY OTHER ising out of participation in, performance in or lack of performance in, including nous.
the facilities and equipment to be used, and if I believe Warehouse Manager, and/or supervisor and either DEC (b) I will ALLOW my PHOTOGRAPH, PICTURE of any social media related to CHED Santas Anonym (4) I CONSENT TO ALL EMERGENCY MEDICAL TRE	ATMENT as may be deemed appropriate under existing circumstances by
medical personnel or personnel associated with CHED	
Emergency Contact Information:	

Database Date_

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