



VOLUNTEER REGISTRATION FORM

SECTION 1 – PERSONAL INFORMATION (PLEASE PRINT CLEARLY)

Last Name: _____ First Name: _____

Address: _____

City/Town: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____

Birth Date: (mm/dd/yy) ____ / ____ / _____

Male

Female

Age: (as of Dec. 31/2018) _____

T-Shirt Size (please check one)

S

M

L

XL

Email: _____

Special skills or talents: _____

SECTION 2 – INTEREST IN SPORT OR ACTIVITY

If you have a preference in what you would like to volunteer for, please specify below. If not, we will place you where you may be most needed.

Candlepin Bowling

Progressive 45's

Contract Bridge

Duplicate Bridge

Cribbage

Scrabble

8-Ball Pool

Darts

Ice Hockey

Swimming

Tennis

Washer Toss

5km Race

10km Race

Mountain Biking

Bocce

SloPitch

Nordic Walking

For more information on the 2019 Nova Scotia 55+ Games in Antigonish visit: www.antigonish55plusgames2019.ca

- | | |
|--|--|
| <input type="checkbox"/> Curling* | <input type="checkbox"/> Disc Golf |
| <input type="checkbox"/> Golf | <input type="checkbox"/> Geocaching |
| <input type="checkbox"/> Track and Field | <input type="checkbox"/> Other: Food / Medical |
| <input type="checkbox"/> Pickle Ball | <input type="checkbox"/> Place me where I'm needed most! |

* Curling will take place on October 17, 18 & 19.

SECTION 3 – AVAILABILITY

Please indicate which times you will be available to volunteer.

August 1st (Thursday) Morning Afternoon Evening

August 2nd (Friday) Morning Afternoon Evening

August 3rd (Saturday) Morning Afternoon Evening

SECTION 4 – 2019 NOVA SCOTIA 55+ GAMES VOLUNTEER WAIVER, RELEASE AND INDEMNITY

I, the undersigned volunteer, desire and agree to volunteer for the 2019 Nova Scotia 55+ Games. I further understand and agree as follows:

1. I am donating my time and services without compensation.
2. I know of no reason, medical or otherwise, that would prevent me from performing the tasks required to participate in this volunteer activity.
3. I assume all risks of participating in this volunteer activity and full responsibility for my conduct and actions, including any injury to myself or others or damage to property that may result while volunteering, and I understand that the 2019 Nova Scotia 55+ Games is not responsible for conditions that I create myself or those created by other volunteers or participants.
4. I, binding my heirs, executors, administrators and assigns, hereby agree to release, hold harmless and indemnify the 2019 Nova Scotia 55+ Games, its officers, officials, employees, agents and volunteers from and against any and all loss, damage, expense or cost (including attorney fees) of any kind for injuries (including property damage, personal injury, disability and death) arising out of this volunteer activity, whether caused by the negligence of the 2019 Nova Scotia 55+ Games or otherwise.
5. I hereby authorize the Nova Scotia 55+ Games Society and the Host committee for the 2019 Nova Scotia Games in Antigonish, NS to use, reproduce and/or publish photographs as described below, which may pertain to me. I understand that this material will only be used in a display website and/or written publication that will be used to promote the 2019 Nova Scotia 55+ Games in particular and the Antigonish

55+ games in general. This authorization is continuous and may only be withdrawn by my specific rescinding of this authorization.

Description of material: Photograph(s) and/or printed material to be used to produce a display for exhibits, websites, trade shows and publicity for the 55+ Games in general, at the provincial level.

YES, I authorize

NO, I do not authorize

I (and parent/legal guardian if volunteer is under age 18) have carefully read this release and understand and agree with all of its terms and conditions.

Signature of Volunteer

Date

Signature of Parent/Legal Guardian (if volunteer is under age 18)

Date