



VOLUNTEER REGISTRATION

Name Date of Birth

Home Phone or Cell Phone Work Phone

E-mail

Address

City Province Postal Code

I consent to sharing my contact information with my gardening team. Providing your email address here also provides your consent to receive email correspondence from us.

New Youth Registration

No gardening experience necessary. The gardening season runs from May to October. Teams garden in the mornings or in the evenings.

I am available Day(s) Between this time.

How did you hear about the North Bay Heritage Gardeners?

I would like to learn about the following gardening topics:

Youth Re-Registration

My Gardening team is My team leader is

I would like to learn about the following gardening topics:



Beyond Gardening:

I would like to help with the following:

- | | |
|---|--|
| <input type="checkbox"/> Education Sessions | <input type="checkbox"/> Helping in other gardens when requested |
| <input type="checkbox"/> Office work (some can be done from home) | <input type="checkbox"/> I am registering as a non-active member; keep me on the contact list. |
| <input type="checkbox"/> Waterfront Garden Tour Guide | |

I hereby covenant and agree to waive and release Heritage North Bay and its constituent groups and members, the corporation of the City of North Bay, its officers, servants, agents, employees and volunteers with respect to any claim or demand arising out of any damage or injury which is caused by or arises from participation of the applicant hereon during any program or in any facility or at any location where a program is being obtained for the purpose of registration. I grant the North Bay Heritage Gardeners, its representative and employees to take photographs and videos of me and agree such mediums may be included in publicity, illustration, advertising and web content. The Applicant hereby consents to public access being provided to this information. I agree to abide by all safety guidelines & risk management procedures as outlined in the volunteer orientation package and volunteer handbook.

I am committed to be a Heritage Gardener volunteer and will report my volunteer hours annually.

Student/Youth Name: _____ Date: _____

Parent/Guardian Signature _____ Date: _____

*Return form by mail or drop-off to the Heritage Gardeners, 100 Ferguson St., North Bay, ON, P1B 1W8
or by email at heritage.gardeners@heritagenorthbay.com*

For Office Use only:				
<input type="checkbox"/> Orientation Pkg	<input type="checkbox"/> Handbook	<input type="checkbox"/> Database Entry	<input type="checkbox"/> Contact	<input type="checkbox"/> Cobbler Apron
<input type="checkbox"/> Membership card	<input type="checkbox"/> Hours form	<input type="checkbox"/> Name tag	<input type="checkbox"/> Newsletter	<input type="checkbox"/> E-mail