

County of Wellington Green Legacy Programme 6714 Wellington Road 34 RR 22 Cambridge, ON N3C 2V4 Please return this form to:
Adam McDowell
Community Outreach Coordinator
E: adammcd@wellington.ca

T: 519.400.3040

Date of Application (M/D/Y) :		Estimated end date (M/D/Y):							
YOUTH VOLUNTEER (13-17 years)									
Applicant Information									
Name:									
		Nursery Location (circle one)							
Volunteer job description: Youth Tree Care V	Puslinch Damascus								
Current address:									
City:	Postal Code:								
Email:		Phone:							
Background Information									
If applicable, what program or organization a	with?	Required hours (if any):							
Relevant experience (from previous voluntee	How long?								
Why would you like to volunteer with us?									
What skills do you bring to the programme?									
Are there specific ways that you would like to help as a volunteer?									



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	Emergency Information																			
List a	List any allergies or health concerns that would be helpful for us know about:																			
Emer	Emergency Contact: Relationship:																			
Address: Main Phone: Secondary Phone:																				
								Α	vailal	oility										
Please highlight days/times when you would be interested in volunteering: AM (9am -12pm) PM (12pm-3pm)																				
Monday Tuesday Wednesday Thursday Friday									lay											
	PM		AM	PM	AN		•	AM	PM		AM	PIV								
		Sprin	g			Sumn	ner				Αι	ıtumı	n					Wint	er	
Comn	Comments:																			
	Signature																			
•	I agree to respect policies and abide by the rules regarding code of conduct within The Green Legacy Programme																			
I agree to co-operate with staff and other volunteers, to follow instructions, to carry out the duties assigned to me																				
If unable to volunteer, I will notify the Community Outreach Coordinator as much in advance as possible																				
Signature of applicant:									Date:											
Signa	Signature of parent/guardian: Date:																			

Questions?

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For Community outreach coordinator to fill out								
Volunteer Requirements								
Photographic Release	Yes	No	Date received:					
Green Legacy Programme Volunteer Information Sheet	Yes	No	Date received:					
In calendar	Yes	No	Date entered:					
Sent to staff:	Yes	No	Date sent:					
Saved in:	Yes	No	Date entered:					



County of Wellington

Green Legacy Programme Volunteer Information Sheet

Come Prepared!

Volunteers are responsible for wearing/bringing:

- Appropriate footwear boots for rain/mud, sturdy shoes for hiking. We suggest closed-toed shoes.
- Hat and/or sunscreen, bug spray
- Rain gear/warm jacket depending on weather and the time of year
- Work gloves if you want to wear work gloves, please bring your own
- Refillable water bottle drinking water will be provided

Because of the different environments we could be working in, try to dress in layers to accommodate the changing temperatures.

Weather and Cancellations

The Green Legacy Programmes generally run rain or shine. The greenhouses are reasonably comfortable regardless of the weather. We also have limited indoor working space in our underground cooler building. In the event of extreme heat or cold weather we will work at a comfortable pace and will take rests as needed.

If severe thunderstorms or other inclement weather are forecasted for the day you plan on volunteering, contact Green Legacy staff by 8:30 am. The decision to cancel programmes is made at the discretion of the Green Legacy Manager. If programmes are cancelled, entry gates will be locked.

Given the limited indoor space available at the Green Legacy Nurseries, it is difficult to accommodate a large number of people in poor weather conditions. Re-scheduling of volunteer dates will be arranged if needed.



PHOTO RELEASE FORM

10:	County of Wellin	igton		
Ι,			h	ereby consent to have myself
and/	or my child,		, photogra	phed.
abov	e named on the In	ternet through t	the Worldwide We	of myself and/or my child as ebsite, Communications Page electronic and/or digital media.
I acl	knowledge as fol	lows:		
1	that you have discretion;	the right to cr	op or treat the	photograph at your sole
2	that whether		to images are use discretion; an	sed and where they are
3		and that any i	mage posted or	n the Internet Website may
to re contr comp cause	lease and hold har ractors, volunteers plaints, suits or oth	mless the Count and employees er forms of liabi y or my child's p	y, its members, to from and against lity that shall arise photograph or like	arent or legal guardian, I agree rustees, agents, officers, all claims, demands, actions, e out of or by reason of, or be eness in the print medium, on m.
I und	derstand the nature	and the purpos	se of this consent	
 Date				
 Print	Full Name			Signature
Addr	ess:			