



VOLUNTEER AGREEMENT

PLEASE READ THE FOLLOWING AGREEMENT VERY CAREFULLY BEFORE SIGNING AS IT AFFECTS YOUR LEGAL RIGHTS.

NOTE: PARENT/GUARDIAN FOR VOLUNTEER UNDER THE AGE OF EIGHTEEN (18) YEARS MUST READ AND SIGN THIS FORM IN ORDER FOR A VOLUNTEER UNDER THE AGE OF EIGHTEEN (18) TO PARTICIPATE.

Name of Volunteer: _____

Address: _____

Home telephone: _____ Cell telephone: _____

Emergency Contact: _____ Relationship: _____

Telephone: _____

Scope of Volunteer Duties (Describe in full - Attach full description if additional space is required):

Location of work: _____ [] Lab [] Office

Equipment to be used: _____

Specify if any protective measures and training are required:

Supervisor: _____ Title: _____

Department: _____ Telephone: _____

Start Date: _____ End Date: _____

Anticipated Number of Hours: _____ per [] Week or [] Month

As a volunteer with the University of Waterloo (herein the "University"), I agree to the following:

The Work:

I acknowledge that the work performed is on a volunteer basis and that there is no employment relationship with the University. I am not entitled to receive a salary, remuneration or employee benefits. Volunteer services do not constitute a guarantee or promise of future employment, nor do they entitle me to greater consideration for any future employment opportunities.

I further agree to perform the work as noted in the Scope of Volunteer Duties and if required provide a criminal background check.

I agree to work under the assigned supervisor's direction and understand that I have a right to refuse to engage in any work that is not deemed safe as per the *Occupational Health & Safety Act*, R.S.O. 1990, c. O.1.

Assumption of Risk

I acknowledge that there may be risks associated with or related to the duties described above. These risks include, but are not limited to, any manner of injury resulting from use or misuse of equipment/tools required to perform the duties.

Confidentiality:

I acknowledge that, in the course of performing my volunteer duties, I may have access to information that may be confidential. I will observe and comply with the University's rules and regulations respecting confidentiality. I will not disclose or give to any person, institution, or source any information or document that comes to my knowledge or into my possession by reason of my service to the University. This duty to protect confidential information extends beyond the termination of my association with the University.

University Policy & Procedures:

The University has various policies in place promoting a safe environment for its members. I agree to abide by all University policies, guidelines, and procedures (available at: <https://uwaterloo.ca/secretariat-general-counsel/policies-procedures-guidelines>).

I understand that my obligations, commitments and understandings set forth in this agreement are important to ensure the integrity of the University and as a result, a breach of this agreement may result in the immediate termination of the volunteer agreement.

Personal Information:

I consent to the collection, use and disclosure of my personal information. I am aware that personal information (as defined under the *Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c. F.31) may be collected before, during or after my work, by the University, including but not limited to:

1. My name, or the name of my legal guardians; and
2. Photographs or videos of those participating in the work.

The University does not and will not sell, trade, or rent any mailing lists. Data is securely and confidentially stored. All personal data provided to the University will be used to:

- Manage, develop and enhance University operations, including programs and services;
- Communicate with participants; and
- Ensure high quality programming and service delivery.

By signing this agreement, I consent to the use of my personal information for the purpose of facilitating my work and for the purposes of marketing University programs and outreach activities to the general public, including use and disclosure in print and digital marketing and promotion and public relations materials, and on the University's website and social media sites and feeds. I am aware that if I do not consent to the collection and use of my personal information for these purposes, I must inform the University in writing.

Termination:

I understand that either the University or I may terminate this agreement at any time for any reason with or without cause and without notice, and without compensation of any kind.

Insurance:

I acknowledge that I have been STRONGLY ENCOURAGED TO CARRY ADEQUATE MEDICAL AND/OR HEALTH INSURANCE covering the contract period and that I am responsible for my own health, dental and medical coverage. I acknowledge and understand that I am not covered by the University's Workers Compensation Insurance.

The University maintains general liability insurance to cover actions and omissions of volunteers on campus, while conducting University business.

Release and Waiver of Liability:

The undersigned volunteer and the University release and hold harmless each other and their governors, executives, employees, students, agents, heirs, executors, administrators, successors and assigns from any and all liability for any loss, damage, injury or expense that they or their next of kin may suffer as a result of the work of the undersigned volunteer, including but not limited to accidents, acts of God, war, civil unrest, sickness, transportation, scheduling, government restrictions or regulations, and any and all expenses which may be incurred because of said work, including without limitation any loss, claims, damages, expenses, judgments, or attorney fees for which the University or the undersigned volunteer is held legally liable.

The undersigned volunteer and the University further release and hold harmless each other and their governors, executives, employees, students, agents, heirs, administrators, successors and assigns from any and all claims of negligence with regard to any and all aspects of participation in the above mentioned work.

I have read, understood and agree to the above terms and conditions in regard to waiver and release of liability, and confirm that I am signing this document freely, having been fully informed as to its content and implications.

Volunteer

Date

University of Waterloo Signatory

Date

VOLUNTEER IS UNDER 18 YEARS OF AGE)

PARENT/GUARDIAN FOR VOLUNTEERS UNDER THE AGE OF EIGHTEEN (18) YEARS MUST READ THIS FORM. PARENT/GUARDIAN PERMISSION IS REQUIRED FOR VOLUNTEER UNDER THE AGE OF EIGHTEEN (18) YEARS.

As parent/guardian with legal responsibility for this volunteer, I acknowledge having read and understood the implications of this volunteer agreement, and I sign this volunteer agreement for and on behalf of the volunteer, and for and on my own behalf, intending to bind the volunteer, myself, and the heirs, executors, administrators and assigns of both of us.

Parent/Guardian Signature

Date

Witness

Date