



KAMLOOPS 2018 BC WINTER GAMES

February 22-25, 2018

Volunteer Registration Form



First Name _____ Last Name _____
 Apt # _____ Address _____
 City _____ Province _____ Postal Code _____
 Mailing Address: same as above OR _____
 Male Female Date of Birth: _____(MO) / _____(DAY) / _____(YEAR)
 Phone _____ Alternative Phone _____ Email: _____
 Yes, I would be willing to let my name be kept in a volunteer database to be used by other groups following the Games
 Yes, I will be attending the Volunteer Appreciation Event on Sunday February 26th

Volunteer Areas within the Games: Please select your first and second choice areas where you would like to volunteer by putting "1" next to your first choice, and the "2" next to your second choice.

Accommodation	Ceremonies & Special Events	Participant & Volunteer Services	Marketing
<input type="checkbox"/> Accommodation Attendant *	<input type="checkbox"/> Opening Ceremonies	<input type="checkbox"/> Participant Accreditation *	<input type="checkbox"/> Creative Services
<input type="checkbox"/> Holding Area	<input type="checkbox"/> Setup	<input type="checkbox"/> Results Centre *	<input type="checkbox"/> Digital Media/Website/App
<input type="checkbox"/> Hospitality *	<input type="checkbox"/> Ushering	<input type="checkbox"/> Volunteer Appreciation	<input type="checkbox"/> Merchandise
<input type="checkbox"/> Housekeeping *	<input type="checkbox"/> General Help	Medical	<input type="checkbox"/> Photography
<input type="checkbox"/> Site Preparation	<input type="checkbox"/> Takedown	<input type="checkbox"/> Medical Clinic	<input type="checkbox"/> Public Relations
<input type="checkbox"/> Dorm Attendant *	<input type="checkbox"/> VIP reception	<input type="checkbox"/> Physiotherapy	Transportation
<input type="checkbox"/> Brocklehurst Middle	<input type="checkbox"/> Marshalling	<input type="checkbox"/> Venue Medical	<input type="checkbox"/> Courtesy Car Driver
<input type="checkbox"/> Kam School of the Arts	<input type="checkbox"/> Special Events	Protocol	<input type="checkbox"/> Luggage Handler
<input type="checkbox"/> Norkam Secondary	<input type="checkbox"/> Setup	<input type="checkbox"/> Guest Registration *	<input type="checkbox"/> Luggage Van Driver
<input type="checkbox"/> Pacific Way Elementary	<input type="checkbox"/> General Help	<input type="checkbox"/> Hosts	<input type="checkbox"/> Dispatch/ Courtesy Cars
<input type="checkbox"/> Sahali Secondary	<input type="checkbox"/> Takedown	<input type="checkbox"/> Medals	<input type="checkbox"/> Lost and Found Operator
<input type="checkbox"/> South Kam Secondary	<input type="checkbox"/> Closing Ceremonies	<input type="checkbox"/> Receptions	<input type="checkbox"/> Volunteer management
<input type="checkbox"/> Valleyview Secondary	<input type="checkbox"/> Setup	Communications Systems	Sport
<input type="checkbox"/> Westsyde Secondary	<input type="checkbox"/> General Help	<input type="checkbox"/> Computer Services *	<input type="checkbox"/> Community Development
Security	<input type="checkbox"/> Ushering	<input type="checkbox"/> Sound Systems	<input type="checkbox"/> Competitions
<input type="checkbox"/> Mobile Patrol *	Logistics	<input type="checkbox"/> Telephone/Radio Systems	<input type="checkbox"/> Equipment
<input type="checkbox"/> Security Headquarters *	<input type="checkbox"/> Properties	Administration	<input type="checkbox"/> Venue Management
<input type="checkbox"/> Special Events	Food Services	<input type="checkbox"/> Information Centre	<input type="checkbox"/> Sport-Specific Volunteer:
<input type="checkbox"/> Sport Venues	<input type="checkbox"/> Box Lunches		Specify Sport: _____
<input type="checkbox"/> Traffic Control	<input type="checkbox"/> Participant Meals		

* Note that positions within the areas above marked with an asterisk (*) may require a criminal records check. If this is the case you will be contacted to have your Criminal Records Review completed. Note that other volunteer positions may also require a criminal records check.

Please indicate below if you have any of the following specific training or skills:

First Aid Certification: specify: _____ Physiotherapy RN LPN MD Driver's Licence Class other than 5: specify _____

For Office Use Only: Volunteer committed to work in: Directorate _____ Chair _____ Task: _____

Volunteer information is collected under the authority of the BC Games Society. The information will be used to arrange liability insurance coverage to address any claims arising from the voluntary participation of volunteers in the 2018 BC Winter Games. The information will also be used to allocate volunteers to the various Chair areas, tasks and functions, and to advise registered volunteers of meetings, training sessions, scheduling, and other Games related information. The names, addresses, email addresses, phone numbers, and/or images of registered volunteers may be used in non-commercial promotion/development of sport and/or the BC Summer and/or BC Winter Games or the BC Games Society, including the provision of information to the media. The names, addresses, email addresses, phone numbers, assigned position, and/or images of all volunteers may be provided to the Premier and/or the Minister responsible for the Games, and/or to members of the legislative assembly, and/or to local members of parliament, and/or to the media for the purposes of recognition, and/or to a local municipal volunteer agency or department and/or to BC Games sport partners for the purpose of recognition and/or informing of other volunteer opportunities in sport and/or to school principals and/or school district superintendents for the purpose of recognition and acknowledgement. For questions about the collection and use of this information, please contact the BC Games Society at 200-990 Fort Street, Victoria, BC V8V 3K2 or (250) 387-1375 or info@bcgames.org.

As a condition of entry into, or volunteering at the BC Winter Games it must be understood that the participants and volunteers enter entirely at their own risk, and will not hold the Kamloops 2018 BC Winter Games Society, the Province of British Columbia, and/or the BC Games Society, their staff, agents, and/or volunteer workers responsible for injury, loss or damage occurring during the 2018 BC Winter Games.

Volunteers and participants may be protected for their actions via a vis third party claims through the liability insurance for the Games but are not covered for any personal claims for injury or accident. Participants and volunteers agree to release, discharge and undertake not to commence action against the Kamloops 2018 BC Winter Games Society, the Province of British Columbia, and the BC Games Society from any and all claims and causes of action, or liability of any kind whatsoever for injuries, property damage, or death which in any way results from participating or volunteering in the Kamloops 2018 BC Winter Games.

The Kamloops 2018 BC Winter Games Society, the Province of British Columbia, and/or the BC Games Society do not assume responsibility for loss of wages, or costs associated with medical, dental or hospital care for athletes, coaches, assistant coaches, managers, officials or volunteers for any injury or loss incurred during the, or as a result of participating or volunteering in the 2018 BC Winter Games.

The BC Games Society will not be liable for any communication between a BC Games Society participant and/or volunteer and any third party group that receives the participant and/or volunteer contact information list from the BC Games Society after the two year period expires under the Canadian Anti-Spam Legislation Act (an Act to promote the efficiency and adaptability of the Canadian economy by regulating certain activities that discourage reliance on electronic means of carrying out commercial activities, and to amend the Canadian Radio-television and Telecommunications Commission Act, the Competition Act, the Personal Information Protection and Electronic Documents Act and the Telecommunications Act S.C. 2010, c. 23) ("Act"). The two year period begins at the conclusion of the 2018 BC Winter Games. This clause is a defence to any violation under the Act regarding any communication between a third party group and a participant and/or volunteer of the BC Games Society that occurs after the two year period has expired. By completing a volunteer registration form (online or paper copy) or being registered to attend the 2018 BC Winter Games participants and volunteers are agreeing to all of the terms outlined in this conditions of entry agreement.

Signature _____ Date: _____

Signature of Parent or Guardian if under 19 years of age: _____

Mail or drop form off: Kamloops 2018 BC Winter Games * c/o Kamloops Sport Council, 262 Lorne St. Kamloops, BC V2C 1W1

Scan and email: volunteerform@bcwintergames.ca

OR complete an online form at www.bcgames.org

Once your volunteer registration form is on file, you will be contacted by telephone or email to confirm your position.