

**PARKS, RECREATION AND LEISURE SERVICES
2ND FLOOR, CITY HALL**

OUTDOOR RINK VOLUNTEER FORM

RINK: _____ **DATE:** _____

NAME: _____

ADDRESS: _____ **POSTAL CODE:** _____

PHONE #: (HOME) _____ **(BUSINESS)** _____

EMAIL: _____

VOLUNTEERING FOR THE FOLLOWING:

- ____ ICE PREPARATION _____ ICE CLEANING
____ TURNING ON / OFF LIGHTS
____ OPENING, SUPERVISION AND CLOSURE OF BUILDING DURING REGULAR
NON-SUPERVISED TIMES
____ OTHER (SPECIFY) _____

**SPECIFY DAYS AND TIMES YOU ARE AVAILABLE TO SUPERVISE USE (i.e. for groups/schools)
OF THE RINK:**

DAY _____ TIME _____

DAY _____ TIME _____

____ **KEY(S) ISSUED #** _____ **DEPOSIT PD \$** _____

DEPOSIT Returned \$ _____ **DATE:** _____

Police Record Check attached (annually)

Accessibility Training Questionnaire Completed (one time only)

I understand and acknowledge that The Corporation of the City of North Bay (hereinafter referred to as the "City of North Bay") holds a municipal liability policy to defend against claims by third parties. The limit of this policy for all damages arising out of one accident or occurrence or a series of accidents or occurrences from one cause to third parties is limited to \$5,000,000.00. Any volunteer worker of the City of North Bay will be defended under this policy from any third party claims.

I further understand that the City of North Bay does not carry disability or worker compensation insurance coverage for my benefit.

I further understand and acknowledge that an authorized employee of the City of North Bay may terminate my services as a volunteer with the Outdoor Rink Volunteer Program at any time without notice or cause.

I agree to follow all guidelines, standards and codes of conduct, which may be set by the City of North Bay. I further agree to follow all federal, provincial and municipal laws and regulations when working as an Outdoor Rink Volunteer.

Date

Outdoor Rink Volunteer Signature