

X-LIFE YOUTH SOCIETY

Adult Volunteer Application Form

Name: _____

Phone: _____ Cell: _____

Primary email: _____

Secondary: email _____

Are you taking any medication? If yes please explain what and why.

Professional Conduct Policy with Regard to Young People.

X-Life Youth Society believes in absolute professional propriety with regard to its work with young people. As such all the following policies are mandatory for X-LIFE staff and volunteers.

1. No staff member or volunteer should have any young person connected with the work of X-LIFE under the age of 18 stay in their house overnight. On exceptional and extraordinary occasions where this is deemed necessary, other staff or volunteers are to be present and parents or guardians must give written permission. No staff member or person acting in a capacity as X-LIFE volunteer is to stay overnight alone with a young person.
2. It is recognised that private conversations are sometimes a necessary part of the work. These will be conducted in a public building or public place and in view of others.
3. Staff or volunteers shall never be under the influence of drugs or alcohol when in contact with youth at an X-Life event. Each X-life program is part of an overall drug and alcohol prevention strategy for youth and as such adults must set a good example. If you are under medication that could alter the way you relate to others or your motor response you must report this to an X-Life supervisor before coming into contact with youth.
4. Joking or talking positively about drugs, alcohol or parties should be avoided.
5. X-LIFE staff and volunteers are under legal obligations with respect to the knowledge they possess regarding young people under the age of 18. As such, the relevant authorities will always be contacted immediately, should we come into any knowledge regarding underage runaways or allegations of any form of abuse. The relevant ministry is the Ministry of Children and Family Development and a duty worker there should be immediately contacted, as should an X-life supervisor.
6. Notwithstanding our obligation to disclose, workers agree to keep confidence where non-public information is shared.
7. No X-LIFE worker or volunteer will be alone in a vehicle with any young person, of the opposite sex, connected with the work of X-LIFE between dusk and dawn. If a journey needs to be conducted after these hours, a third person, preferably a staff or volunteer, should always be present. In exceptional circumstances where such a journey is of crucial importance [medical emergency etc] and no other staff or volunteer is available, the staff member must ensure that the youth rides in the back seat only.

8. Male leaders shall not make a habit of hugging female youth and female leaders shall not make a habit of hugging male youth.
9. If you receive information concerning a youth using drugs or alcohol you should immediately report this to an X-Life supervisor.
10. All X-LIFE staff and volunteers must submit to criminal record checks.
11. All X-LIFE staff and volunteers must be willing submit to random illegal drug tests.

Risks

There are known and unknown risks of your injury and death. Participants are responsible to educate themselves on the scope of those risks and take full responsibility for their own safety. *Declaration:* I take full responsibility for my actions and agree to release X-life Youth Society, their respective directors, employees, volunteers, sponsors and associates from all claims for damages arising from actions, accidents, injury or loss caused by my participation. I understand that X-Life Youth Society does not provide liability or any other type of insurance and that insurance is solely my own responsibility.

Agreed to:

Print Name Here: _____

Signed _____ Date _____

X-LIFE YOUTH SOCIETY

Adult Volunteer Driver Application Form

Yes! I'm willing to drive kids around in my vehicle.

Name _____ Drivers License # _____

Date of birth _____

Besides yourself, how many passengers can you legally carry in your vehicle? _____

Authorization to release information:

I hereby authorize ICBC and the Motor Vehicle Branch to release my personal driving record (abstract) to X-Life Youth Society.

Signature _____ Date _____

Copy both sides of your driver's license and attach to this application as well as a copy of your vehicle insurance papers.

THANK YOU!! FOR YOUR COMMITMENT TO X-Life AND THE YOUTH!

Fax to 604-905-0931

RELEASE OF LIABILITY, WAIVER OF CLAIMS

For all X-Life Programs

ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT

BY SIGNING THIS AGREEMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE OR CLAIM COMPENSATION FOLLOWING AN ACCIDENT

PLEASE READ CAREFULLY!

ASSUMPTION OF RISKS

I am aware that driving a vehicle, racing a vehicle, snowmobiling, tobogganing, hiking and other physical activities (hereinafter collectively referred to as the "**Activities**") involve many risks, dangers and hazards including, but not limited to: driving or racing a vehicle as a driver or passenger, snowmobiling as a passenger or driver, being towed behind a snowmobile on a tube or toboggan, driving to/from Activities; changing weather conditions; avalanches; loss of balance or control; exposed rock, earth, ice, and other natural objects; trees, tree wells, tree stumps and forest dead fall; the condition of snow, ice or mud on or beneath the surface; variations in the terrain which may create blind spots or areas of reduced visibility; variations in the surface or sub-surface, including changes due to man-made or artificial obstacles or jumps; variable and difficult conditions; streams, creeks, and exposed holes in the snow pack above streams or creeks; cliffs; crevasses; other drivers, snowmobiles; safety gear, snocats, graders, industrial equipment, tools, road-banks or cut-banks or cliffs; collision with obstacles, fences, snowmobiles or other vehicles, equipment or structures; collision with other persons; being hit by a snowmobile or vehicle; the failure to act safely or within one's own ability or to stay within designated areas; negligence of other drivers, participants, volunteers, supervisors, snowboarders, hikers and other persons; and **NEGLIGENCE ON THE PART OF X-LIFE YOUTH SOCIETY** and its and its directors, members, officers, employees, volunteers, associates, agents, representatives, sponsors, successors and assigns, **INCLUDING THE FAILURE ON THEIR PART TO TAKE REASONABLE STEPS TO SAFEGUARD OR PROTECT ME FROM THE RISKS, DANGERS AND HAZARDS OF THE ACTIVITIES. I ACKNOWLEDGE THAT THE USE OF INTERMEDIATE OR ADVANCED ACTIVITIES, HIGH PERFORMANCE EQUIPMENT OR ATTEMPTING STUNTS, JUMPS, TRICKS OR ADVANCED MANEUVERS INVOLVES INCREASED RISK OF INJURY OR DEATH.**

**** ____ (INITIAL) Agreed To By: Participants (or Guardian if under 18) named in this Agreement**

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In consideration of X-LIFE YOUTH SOCIETY accepting my participation in their program and allowing me to participate in Activities and use equipment and facilities (hereinafter referred to as "the facilities"), I hereby agree as follows:

1. TO WAIVE ANY AND ALL CLAIMS that I have or may in the future have against X-Life Youth Society, and its directors, members, officers, employees, volunteers, associates, agents, representatives, sponsors, successors and assigns (all of whom are hereinafter collectively referred to as "THE RELEASEES"), and TO RELEASE THE RELEASEES from any and all liability for any loss, damage, expense or injury including death that I may suffer, or that my next of kin may suffer resulting from either my Participation in the Activities, use of or my presence on the facilities, DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE UNDER THE OCCUPIERS LIABILITY ACT, R.S.B.C. 1996, c.337, ON THE PART OF THE RELEASEES, AND ALSO INCLUDING THE FAILURE ON THE PART OF THE RELEASEES TO SAFEGUARD OR PROTECT ME FROM THE RISKS, DANGERS AND HAZARDS OF THE ACTIVITIES REFERRED TO ABOVE;

2. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any damage to property of or personal injury to any third party, resulting from my use of or presence on the facilities or participation in the Activities;

3. This Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity;

4. This Agreement and any rights, duties and obligations as between the parties to this Agreement shall be governed by and interpreted solely in accordance with the laws of the Province of British Columbia and no other jurisdiction; and

5. Any litigation involving the parties to this Agreement shall be brought solely within the Province of British Columbia and shall be within the exclusive jurisdiction of the Courts of the Province of British Columbia.

- In entering into this Agreement I am not relying upon any oral or written representations or statements made by the Releasees with respect to the safety of the activities other than what is set forth in this Agreement.

**** ____ (INITIAL) Agreed To By: Participants (or Guardian if under 18) named in this Agreement**

I ACCEPT THIS AGREEMENT AND AGREE TO BE BOUND BY ITS TERMS AND I WISH TO CONTINUE WITH PARTICIPATION WITH Activities.

**** ____ (INITIAL) Agreed To By: Participants (or Guardian if under 18) named in this Agreement**

I HAVE READ AND UNDERSTAND THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS, ASSIGNS AND REPRESENTATIVES MAY HAVE AGAINST THE RELEASEES. I SIGN IT WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE.

This Indemnity Agreement will remain in full force and effect for each succeeding year that the participant is engaged in the Activities and need not be renewed each year.

By signing below I agree to be bound by the terms and conditions of this agreement.

Full name of parent, volunteer or staff	Signature (of guardian if under legal age)

Date signed _____