The British Columbia Conservation Foundation

RELEASE OF LIABILITY, WAIVER OF CLAIMS, AND ASSUMPTION OF RISKS; BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE.

PLEASE READ CAREFULLY

NAME:			
BIRTH DATE:			
ADDRESS:			

ASSUMPTION OF RISKS

I am aware that volunteering in project-related activities with the British Columbia Conservation Foundation involves risks, dangers and hazards associated with environmental/biology field work including, but not limited to: accidents associated with travel to and from research area and/or between field sites; remote accommodation; injuries associated with working in managed/unmanaged forests of all ages and types; drowning and other water related accidents; allergic reactions; poisonous plants; hypo- and hyperthermia; infectious viral, bacterial and fungal diseases, including COVID-19; and risk of attack from wild and domestic animals. I freely accept and fully assume all such risks, dangers and hazards and the possibility of personal injury, death, property damage and loss resulting there from. I am aware that The British Columbia Conservation Foundation carries accidental death and dismemberment insurance coverage for volunteers.

COVID-19

I understand that there is a risk of contracting COVID-19 while volunteering. I agree to read the BCCF COVID-19 Safety Plan (https://bccf.com/) and follow all recommended guidelines.

RELEASE OF LIABILITY, WAIVER OF CLAIMS

In consideration of The British Columbia Conservation Foundation permitting me to volunteer in project-related activities and permitting my use of project vehicles, equipment, facilities and/or services I hereby agree as follows:

1. To waive any and all claims that I have or may in the future have against The British Columbia Conservation Foundation, their directors, officers, employees, agents and representatives (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, injury or expense that I may suffer or that my next

of kin may suffer as a result of my volunteering in project-related activities 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 owed under the OCCUPIERS LIABILITY ACT, R.S.B.C. 1996, C .337, ON THE PART OF THE RELEASEES;

- 2. 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;
- **3.** This Agreement shall be governed by and interpreted in accordance with the laws of the Province of British Columbia; and
- **4.** Any litigation involving the parties to this Agreement shall be brought within 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 other than what is set forth in this Agreement.

I have read and understand this Agreement and 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.

igned this day of	(Month)	(Year)
(Signature of Volunteer)	(Print Name)	
(Signature of Parent/Guardian	if volunteer under 19)	
(Signature of Witness)	(Print Name)	

This Agreement must be completed in full, signed, dated and witnessed before volunteering in all project-related field activities.