





VOLUNTEER WAIVER FORM

(PLEASE PRINT ALL INFORMATION)

Name of Volunteer:	
Address:	
Home Telephone:	Work Telephone:
Emergency Contact:	Telephone:
Volunteer Duties (Describe Briefly):	
Supervisor:	Title:
Department:	Telephone:
Start Date:	End Date:

VOLUNTEER CODE OF ETHICS AND CONDUCT

The Six Nations of the Grand River Development Corporation's Code of Ethics and Conduct applies equally to all and sets out the type of interpersonal behaviour required without exception. Individuals will interact with one another in a civil, dignified, honest, fair and equitable manner.

The types of discrimination which will not be tolerated include, but are not limited to, those set out in the Ontario Human Rights Code; discrimination on the basis of race, ancestry, place of origin, colour, ethnic origin, citizenship, religion, creed, sex, sexual orientation, age, record of offences, marital status, family status or handicap.



I, _____ understand and agree with the following conditions concerning services performed by me as a Volunteer:

It is understood that if a Volunteer is injured while performing services on the Six Nations of the Grand River Development Corporation premises, the Development Corporation will provide, at the time of injury, reasonable emergency first aid for that injury without charge, regardless of apparent fault; and it is also understood that the provision of emergency medical service does not constitute an admission of liability on the part of the Six Nations of the Grand River Development Corporation.

I further understand that accidents and injuries can arise out of the activity; knowing the risk, nevertheless, I hereby agree to assume those risks and to release and to hold harmless the Six Nations of the Grand River Development Corporation, who (through negligence or carelessness) might otherwise be liable to me (or my heirs or assigns) for damages.

It is further understood and agreed that this waiver, release and assumption of risks is to be binding on my heirs and assigns.

In consideration of my volunteer work as outlined above, I understand that I am not entering into an employment relationship with the Six Nations of the Grand River Development Corporation and that I am not entitled to receive a salary or any employee benefits. I understand that either the Development Corporation or I may terminate this volunteer relationship at any time without notice.

I also understand that I have an obligation to respect the confidentiality of any sensitive information or dealings, which may relate to my volunteering at the Six Nations of the Grand River Development Corporation, and I agree that I will not disclose any information without the prior written authorization from the Development Corporation.

Release and Waiver. Volunteer does hereby release and forever discharge and hold harmless the Six Nations of the Grand River Development Corporation and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from any liability or claim that the Volunteer may have against the Development Corporation with respect to any bodily injury, personal







injury, illness, death, property damage or property loss that may result from Volunteer's Activities with the Six Nations of the Grand River Development Corporation, whether caused by the negligence of the Development Corporation or its directors, employees, agents or otherwise. Volunteer also understands that the Six Nations of the Grand River Development Corporation does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness.

Completed on	(day)	(month)	(year)
Signature of Volunto	eer	Signature of Supervisor	
 Witness			
(If volunteer is under parent or legal guar		e, witness signature s	hould be that of
Approved	by Matt Jamieso	n, CEO/President	