



Adopt a Street Registration

Please review the Adopt a Street Program Guide, then fill out this application form. Return completed forms **(including the risk, waiver and indemnity agreement)** to:

Village of Anmore
Attention Michelle Nalleweg
2697 Sunnyside Road, B.C.

The Adopt a Street Coordinator will contact you to confirm participation in the program.

Contact Us!
Michelle Nalleweg Adopt a Street Coordinator 2697 Sunnyside Road
Phone: 604.469.9877 michelle.nalleweg@anmore.com

Contact Information	
First Name:	Last name:
Address:	
Daytime phone:	Evening phone:
Cell:	Email:
Preferred communication method:	<input type="checkbox"/> Phone <input type="checkbox"/> Email

Emergency Contact		
First Name:	Last name:	
Daytime phone:	Evening phone:	Cell:
Relationship:		

Preferred Adoption Location
<i>Please be as detailed as possible, in terms of street names, location, number of blocks and whether you wish to adopt one or both sides of the street</i>
First Choice:
Second Choice:

Risk, Waiver and Indemnity Agreement

By signing this Agreement, you waive certain legal rights, including the right to sue. **Please read carefully.**

To: Village of Anmore ("Village")

Adopt a Street Program Requirements

I confirm that I am 19 years of age or older.

I confirm that I have read the Overview of the Village of Anmore's Adopt a Street Program ("Overview") and the Adopt a Street Safety Guide ("Safety Guide"), understand that they are the terms and conditions of my participation in the Village of Anmore's Adopt a Street ("Program") and I agree to adhere to such terms and conditions.

I agree to take care to minimize the risks associated with the Program and while participating in the Program, I will wear a safety bib, gloves, and appropriate footwear and to use equipment, tools and materials provided by the Village. I will promptly notify the City in the event I am injured or property is damaged while I am participating in the Program.

I understand that I am free to withdraw from or reduce my participation in the Program at any time.

Awareness and Assumption of Risk

I acknowledge that there are dangers, risks and hazards associated with participation in the Program including, but not limited to, the risk of injury, contact with dangerous debris, slips or trips and falls on slippery or uneven surfaces, and collision with passing traffic, and freely accept and assume all dangers, risks and hazards associated with the Program. I understand that the Village's workers' compensation coverage does not apply to me as a volunteer and that the Village's insurance covers only basic contingent accident medical coverage for volunteers.

Waiver of Claims, Release of Liability and Indemnity Agreement

In consideration of the acceptance of my registration and participation in the Program, I hereby for myself, my heirs, executors, administrators, or any others who may claim on my behalf:

1. Covenant not to sue and hereby waive, release and discharge the Village, and anyone acting for or on the Village's behalf, from any and all claims of liability for injury, loss or damage of any kind or nature, arising out of or sustained in the course of my participation in the Program. This Release and Waiver applies to all claims, foreseen or unforeseen, including negligence and breach of statutory or other duty of care (including that owed under the Occupier's Liability Act).
2. Hold harmless, release and indemnify the Village from any and all liability for any loss, damage, injury or expense that I may suffer or that any of my dependants may suffer as a result of the Program due to any cause whatsoever including, without limitation, negligence, breach of contract or breach of any duty of care under the Occupiers Liability Act (British Columbia) or other enactment on the part of the Village.

I recognize that by signing this document I am waiving certain legal rights, including the right to sue.

Signature of Participant:	
Print Participant's Name:	Date signed:

Signature of Witness:		
Print Witness' Name:	Date signed:	
Address:	City:	Postal Code: