

SNOW ANGELS PROGRAM

VOLUNTEER INFORMATION PACKAGE



Organized by:
Jennifer Hoyer, Seniors Coordinator
Fort Saskatchewan Family and Community Support Services
10005 102 Street
Fort Saskatchewan AB
T8L 2C5
Phone: (780) 992-6623
Fax: (780) 992-0192
Email: jhoyer@fortsask.ca



Information for Volunteers

How does the Snow Angels Program work?

A volunteer service program where individuals, organizations, businesses, classrooms, families, and groups of youth can commit to removing snow from the driveway and entranceway of a community resident in need throughout the winter season.

Interested volunteers can contact us and be matched with a resident(s) in need of snow clearing in their neighbourhood. The volunteer is committed to the same resident throughout the campaign but may assist more than one person, if desired.

Why Volunteer?

The Snow Angels Program is a proactive approach to helping those who have difficulty or no capable means to clearing their walkways. Rather than scrambling for support and help after a major snowfall, resources for these residents will be in place in advance which provide peace of mind and more consistency to relief efforts.

The program is also a fun and healthy opportunity for citizens of all ages to enjoy the outdoors while making a personal contribution to improving the quality of life of another in need. The Snow Angels Program fosters a sense of ownership and goodwill, encourages civic responsibility and pride in the community and builds appreciation and connection between citizens of all ages. Studies have shown that when citizens actively work together for each other, crime decreases, health improves, resources can be redistributed and quality of life becomes better for all.

Who should take part in the Snow Angels Program?

People of all ages can take part. Individuals, organizations, businesses, work units, classrooms, families, church groups, and groups of youth are all encouraged to help!

What do I need to get involved?

A shovel or snow blower. See the *Safety Tips* section for more information. We encourage the residents to allow the volunteer to use their shovels, ice chippers, ice melt, etc. We ask that they have the tools easily accessible for the volunteer at all times.

How often does the property need to be cleared?

Snow should be cleared within 48 hours of the last snowfall. If the volunteer cannot make it to the resident's home within 48 hours, the volunteer will contact the resident to reassure them of when they can make it.

What areas of the resident's property needs to be cleared?

When you make initial contact, discuss which areas of the property need snow removal. This is also a good time to discuss any barriers or hazards that could impede the snow removal on their property. Generally, the volunteers would clear the sidewalks and driveway of the resident's home. **It is the responsibility of the resident to ensure that the property is safe.**

How long is the commitment?

The nature of the program is to provide a resident in need with a regular service until the end of the winter/snow season. However, we will never decline a volunteer with a snow shovel or blower! We will make sure that everyone who wants to shovel gets paired with a resident in need, even if it is only a one- time commitment. If you will be away, it is best to let your resident know ahead of time and where possible find a suitable replacement during your absence.

Can I accept tips?

Since the program is a volunteer-based initiative, volunteers are not permitted to accept payment of any kind from residents. Call us with any concerns that may arise. Residents may want to show their appreciation with a thank you card or a hot chocolate. These small gestures are acceptable.

Do you screen the volunteers?

All volunteers must complete an application form and a criminal record check prior to being put on the list. **The Program Coordinator will give you a letter that must be brought with you to the RCMP Detachment in order to have the fee waived.** We assume no responsibility for the actions of the volunteers.

How do I get involved?

1. Call the FCSS Seniors Coordinator at 780-992-6623 to request an application package or
2. Call FCSS at 780-992-6267 to request an application package.
3. Download the forms off of the City of Fort Saskatchewan's website www.fortsask.ca
4. Complete and return the application forms and criminal record check to the FCSS Seniors Coordinator.
5. You will then be added to our volunteer participant list.
6. We'll contact you to discuss a match.

Safety Tips for Snow Removal

Why shovel your driveway and sidewalks?

Snow and ice create a hazardous situation for everyone but especially for seniors and people with disabilities. Shoveling and using salt, sand or other substances with ice melting properties will help reduce the potential for slip and fall incidents, which can cause serious injuries. Snow shoveling requires proper preparation, the right tools, good technique and basic safety precautions.

Preparation:

- Talk to your doctor about this activity, your health status and about your suitability for this program.
- Shovel at least 1-2 hours after eating and avoid caffeine or nicotine during the activity.
- Warm up first (walk or march in place for several minutes before beginning, stretch arms and legs).
- Start slow and continue at a slow pace (suggestion: shovel for 5–7 minutes and rest 2–3 minutes).
- Drink lots of water to prevent dehydration.
- Shovel fresh snow sooner; new snow is lighter than heavily packed/partially melted snow.
- Take breaks when you are feeling tired.

Tools:

Shovel:

- Sturdy yet lightweight is best (a small plastic blade is often better than a large metal blade).
- Choose a shovel that is comfortable for your height and strength. One that is too long or too short will add extra effort and strain.
- An ergonomically correct model (curved handle) can help prevent injury.
- Spray the blade with a silicone-based lubricant or WD-40 as snow will not stick and will slide off better.

Snow blower (optional):

- You are most welcome to use your snow blower in the program.
- Never add fuel when the engine is running or hot. Do not operate the machine in an enclosed area.
- Never stick your hands in the snow blower! If snow becomes too impacted, stop the engine and wait more than five seconds. Use a solid object to clear wet snow or debris from the chute. Beware of the recoil of the motor and blades after the machine has been turned off.
- Do not leave the snow blower unattended when it is running. Shut off the engine if you must walk away from the machine.

Proper clothing:

- Wear multiple layers and cover as much skin as possible.
- Wear a hat, scarf and mittens (mitts are warmer than gloves).
- Wear boots with non-skid/no-slip rubber soles.

Technique:

- Always try to push snow rather than lifting it.
- Walk to dump snow rather than throwing it to the side since this requires a twisting motion that stresses your back.
- Stand with feet at hip width for balance.
- Hold the shovel close to your body.
- Space hands apart to increase leverage.
- Bend from your knees, not your back.
- Tighten your stomach muscles while lifting.
- If the ground is icy or slippery, we recommend spreading kitty litter to create better foot traction.

Stop shoveling immediately and call for help if you experience:

- unusual discomfort, pain or heaviness in the chest, arms or neck
- unusual shortness of breath
- faint or dizzy spells even after taking a break
- excessive sweating or nausea and vomiting

REMEMBER:

- * A warm-up goes a long way!
- * Wearing the right clothing is key!
- * Bring lots of water to drink!
- * Use the right tools and technique!
- * HAVE FUN!!!



SNOW ANGELS APPLICATION FORM

Name: _____ Date: _____
Mailing Address: _____ Postal Code: _____
Phone Number: _____ Email: _____
Emergency Contact: _____ Phone: _____

How many residents are you able to assist? ____

How did you hear about the Snow Angels Program?

Friend: ____ Advertising: ____ Other Agency/Organization: ____ Other: ____

GROUP INFORMATION

Is this application on behalf of a school effort? Yes No

If yes, name of school: _____ Grade Level(s): _____

Total number of volunteers: _____

Is this application part of a company, organization or group effort? Yes No

If yes, name of company, organization or group: _____

Total number of volunteers: _____

PHOTO RELEASE DECLARATION

I do hereby agree to be photographed by the City of Fort Saskatchewan while participating in the Snow Angels Program for the purpose of advertising, promotion and publicity campaigns.

Signature _____ **Date** _____

DISCLOSURE

Yes No I have read the information package and I am aware of the safety risks associated with the Snow Angels Program. I agree to follow the terms and conditions outlined in the information package.

Yes No I consent to the City of Fort Saskatchewan providing my first name only to my matched resident.

Yes No I understand that this is a volunteer engagement until the end of the winter season without financial remuneration, as outlined in the information package.

Yes No I agree to provide a Criminal Record Check before being matched with a resident.

Signature _____ Date _____

OFFICE USE ONLY

Matched Resident: _____ Phone Number: _____

Yes No Completed application forms signed and on file

Yes No Original Criminal Record Check seen and copy on file

Follow up/Notes:

This personal information is being collected under the authority of Section 33(c) of the *Freedom of Information and Protection of Privacy Act* and will be used to administer City of Fort Saskatchewan volunteer programs. It will be treated in accordance with the privacy protection provisions of Part 2 of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection, contact the FOIP Coordinator for the City of Fort Saskatchewan at 780-992-6236.



**RELEASE OF LIABILITY, WAIVER OF CLAIMS,
ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT**

WARNING: BY SIGNING THIS LEGAL DOCUMENT, YOU GIVE UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE, CLAIM DAMAGES, AND SEEK COMPENSATION.

This document is to be signed by the participant in order to *participate in/use and enjoy* the Snow Angels Program for 20___ and all related events and activities (collectively referred to as the “**Program**”).

I, (*print name*) _____ (the “**Participant**”), am 18 years of age or older, and I am aware that the **Program** involves inherent risks, dangers and hazards, involving all manner of injury or loss, including potentially serious or life-threatening injury and death, including, but not limited to:

- (a) the use of equipment, materials or facilities related to the **Program**;
- (b) the actions or negligence of myself or other participants in/users of the **Program**;
- (c) the actions or negligence of the **City of Fort Saskatchewan** or its council, officers, employees, agents, invitees, or representatives of any kind (collectively referred to as the “**Municipality**”); or
- (d) additional risks arising out of the **Program** and related events and activities.

I, the undersigned **Participant**, freely accept and assume all such risks, dangers and hazards and the possibility of injury, death, property damage, property loss or any other loss or expense resulting to myself.

I, the undersigned **Participant**, hereby agree as follows:

- (a) **TO WAIVE ANY AND ALL CLAIMS** of every nature and kind at law or equity or under any statute that I have or may have in the future against the **Municipality**;
- (b) **TO RELEASE THE MUNICIPALITY** from any and all liability for injury, death, property damage, property loss or any other loss or expense that I may suffer or that my next of kin or legal representatives may suffer as a result of participation in the **Program**, due to any cause whatsoever, including negligence on the part of the **Municipality**;
- (c) **TO HOLD HARMLESS AND INDEMNIFY THE MUNICIPALITY** from any and all liability for injury, death, property damage, property loss or any other loss or expense to any party, including myself, as a result of participation in the **Program**, or other financial loss or expense including, without restriction, legal expenses and costs on a solicitor-and-his-own-client full indemnity basis in defending against such claims or enforcing the terms contained within this document; and
- (d) **THAT THIS AGREEMENT WILL BE EFFECTIVE AND BINDING UPON** myself, and my heirs, next of kin, executors, administrators and assigns.

I, the undersigned **Participant**, hereby acknowledge that I have read the foregoing, and have had the opportunity to ask questions and clarifications before signing. I acknowledge that I understand its content, import and meaning and hereby do agree, approve and consent to the above.

Date: _____

Witness Name (*print*): _____) **Participant Signature:** _____
)
Witness Signature: _____)



**RELEASE OF LIABILITY, WAIVER OF CLAIMS,
ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT**

WARNING: BY SIGNING THIS LEGAL DOCUMENT, YOU GIVE UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE, CLAIM DAMAGES, AND SEEK COMPENSATION.

This document is to be signed by (*print name*) _____ (the “**Participant**”) together with (*print name(s)*) _____, being the parent(s) and/or guardian(s) of the **Participant**, in order to *participate in* the Snow Angels Program for 20____ and all related events and activities (collectively referred to as the “**Program**”).

We, the undersigned **Participant** and the parent(s) and/or guardian(s) of the **Participant**, are aware that the **Program** involves inherent risks, dangers and hazards, involving all manner of injury or loss, including potentially serious or life-threatening injury and death, including, but not limited to:

- (a) the use of equipment, materials or facilities related to the **Program**;
- (b) the actions or negligence of the **Participant** or other participants in/users of the **Program**;
- (c) the actions or negligence of the **City of Fort Saskatchewan** or its council, officers, employees, agents, invitees, or representatives of any kind (collectively referred to as the “**Municipality**”); or
- (d) additional risks arising out of the **Program** and related events and activities.

We, the undersigned **Participant** and the parent(s) and/or guardian(s) of the **Participant**, freely accept and assume all such risks, dangers and hazards and the possibility of injury, death, property damage, property loss or any other loss or expense resulting to the **Participant** or myself/ourselves.

We, the undersigned **Participant** and the parent(s) and/or guardian(s) of the **Participant**, hereby agree as follows:

- (a) **TO WAIVE ANY AND ALL CLAIMS** of every nature and kind at law or equity or under any statute that we have or may have in the future against the **Municipality**;
- (b) **TO RELEASE THE MUNICIPALITY** from any and all liability for injury, death, property damage, property loss or any other loss or expense that the **Participant** or myself/ourselves may suffer or that respective next of kin or legal representatives may suffer as a result of participation in the **Program**, due to any cause whatsoever, including negligence on the part of the **Municipality**;
- (c) **TO HOLD HARMLESS AND INDEMNIFY THE MUNICIPALITY** from any and all liability for injury, death, property damage, property loss or any other loss or expense to any party, including ourselves, as a result of participation in the **Program**, or other financial loss or expense including, without restriction, legal expenses and costs on a solicitor-and-his-own-client full indemnity basis in defending against such claims or enforcing the terms contained within this document; and
- (d) **THAT THIS AGREEMENT WILL BE EFFECTIVE AND BINDING UPON** ourselves, and our respective heirs, next of kin, executors, administrators and assigns.

We, the undersigned **Participant** and parent(s) and/or guardian(s) of the **Participant**, hereby acknowledge that we have read the foregoing, and have had the opportunity to ask questions and clarifications before signing, and have explained its meaning to the **Participant**. We acknowledge that we understand its content, import and meaning and hereby do agree, approve and consent to the above.

Date: _____

Witness Name (<i>print</i>): _____)	Participant Signature: _____
)	
Witness Signature: _____)	Parent/Guardian Signature: _____
)	
)	Parent/Guardian Signature: _____

This personal information is being collected under the authority of Section 33(c) of the *Freedom of Information and Protection of Privacy Act* and will be used for Program purposes. It will be treated in accordance with the privacy protection provisions of Part 2 of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection, contact the FOIP Coordinator for the City of Fort Saskatchewan at 780-992-6236.

OATH OF CONFIDENTIALITY

I _____ of the City of Fort Saskatchewan in the province of Alberta, agree to the following terms and conditions governing my work as a volunteer for The City of Fort Saskatchewan.

1. All information given by any client whether given orally or in writing, or in any form is to be kept strictly confidential except, for being exchanged with the staff or volunteers working with The City of Fort Saskatchewan in the fulfillment of my duties as a volunteer.
2. I, knowing the above stated policy, agree that should I deliberately or accidentally breach term 1; I accept full responsibility for both the breach and any and all losses that may result from any act of omission on my part.
3. I understand that failure to observe the above mentioned terms might result in my dismissal as a volunteer with The City of Fort Saskatchewan.
4. I affirm that I understand and freely consent to the above-mentioned terms and conditions.

Dated this _____ day of _____ 20_____

Volunteer

Witness

This personal information is being collected under the authority of Section 33(c) of the *Freedom of Information and Protection of Privacy Act* and will be used for City of Fort Saskatchewan volunteer programs. It will be treated in accordance with the privacy protection provisions of Part 2 of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection, contact the FOIP Coordinator for the City of Fort Saskatchewan at 780-992-6236.

