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|  |  | **Personal Information**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_ /\_\_\_ /\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ mm/dd/yyyy**Emergency Contact**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_-\_\_\_\_\_-\_\_\_\_\_\_**Medical Information** Are there any medical conditions we should be aware of? YES | NOIf yes, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Other Information**Do you have experience working on a farm/gardening?YES | NOIf yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_What areas of the farm are of interest to you?GARDENING | ANIMALS | PROGRAMS | OTHERIf other, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Why are you interested in volunteering on the farm? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Consent**(check all that apply)\_\_\_\_ I confirm, to the best of my knowledge, that I do not suffer from any medical condition other than those listed above.\_\_\_\_ I give permission for Generations Marketplace to take and/or use photo/video content taken during my time on the farm for promotional purposes. \_\_\_\_ I agree to indemnify and hold blameless Generations Marketplace and/or its personnel, from and against any loss, damage or injury suffered by myself as a result of the tasks assigned by Generations Marketplace, as well as any medical treatment authorized by the supervising individuals representing Generations Marketplace.Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_ / \_\_ / \_\_\_\_mm/dd/yyyySignature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Volunteer****Form****CONTACT**PHONE:519-718-2273ADDRESS:200 Concession 13 TownsendSimcoe, ONEMAIL:generationsmarketplacealc@gmail.comWEBSITE:generationsmarketplace.ca |  |