



# Liability Release Form

**PLEASE SUBMIT THIS PAGE FOR OUR RECORDS**

**Dear Volunteer,**

The Lake Huron Centre for Coastal Conservation's (Coastal Centre) Coast Watchers Program intends that volunteers participating in any Centre activity are not acting on behalf of the Coastal Centre or any Centre partner in any capacity. As such, it is the Coastal Centre's intent that volunteers are not authorized to be considered agents, employees, or authorized representative of the Centre or a Centre partner for any purpose.

Volunteers must recognize the potential for injuries to themselves and their personal property which may result from volunteer activities conducted with the Coast Watchers Program or other activities delivered by the Coastal Centre. The Coastal Centre and all partners intend that volunteers expressly assume all risks and liability for any injuries to, or caused by, volunteers under this program.

**LIABILITY RELEASE**

In consideration of the foregoing, I, myself, my heirs, and executors so hereby release and discharge the Lake Huron Centre for Coastal Conservation (Coastal Centre) and all of the Coastal Centre's supporting organizations for all claims, damages, actions, and whatever in any manner ensuring or growing out of my participation in the Coast Watchers program or other activities sponsored or organized by the Coastal Centre.

**CONSENT:**

- I understand and acknowledge that risk of injury are inherent in the participation of shoreline activity, and other outdoor programs. These types of injuries are my responsibility to treat.
- I understand and acknowledge that it is up to the discretion of the participant to complete the monitoring activity based on the weather, wave activity, and state of health of the participant.
- I will not complete monitoring if it puts myself, my family, or associates at risk, based on my discretion.

**SIGNED:**

Name (print):

Address:

Signature:

Email:





# Authorization to Release Information Form

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The Coast Watchers Program requires data and observations to be collected and submitted as a core part of the program. I hereby authorize the Lake Huron Centre for Coastal Conservation to use the following information related to my participation in the Coast Watchers program (check all that are applicable).

- My name (if not, you will remain anonymous through your CW#)
- My monitoring location
- Photographs taken by me
- Data collected by me
- Participation responses to surveys or webinars

I grant the Lake Huron Centre for Coastal Conservation, its representatives and employees, the right to use the above noted information in connection with the Coast Watchers program including reports, illustrations, photos, and field data cards in Centre related material such as Annual Reports, monthly e-newsletters, and social media.

## **I HAVE READ AND UNDERSTAND THE NATURE OF THIS FORM:**

- I understand that I may revoke permission to use my name, monitoring location, and participation results at any time, with written notice.
- I understand that the data collected is a core part of this program. If wishing to remain anonymous, data will still be processed but your location and name will not be associated with the results.

## **SIGNED:**

Name (print):

CW#:

Signature:

Email:

