

# Show your community pride

and participate in a 2-hour Clean Up Blitz from 9 a.m. to 11 a.m. on Saturday, April 30<sup>th</sup>, 2016.

Participants are asked to spend 2 hours picking up roadside litter.

Participants must pre-register by April 22<sup>nd</sup>. **No late registrations will be accepted.** You can register your group at any Citizen Service Centre or by downloading the registration package and faxing the <u>Group Registration and Program Requirements Information Sheets</u> back to 705-671-1148 or emailing it to wastemanagement@greatersudbury.ca

Safety vests, gloves and garbage bags will be supplied. Please note that safety vests must be returned to any Citizen's Service Centre or to the Environmental Services Office at 1805 Frobisher Street no later than May 6<sup>th</sup>, 2016.

All participants must review the Safety Tips and sign a Consent, Release and Waiver Form. These forms can be submitted to the City after the event, no later than May 6<sup>th</sup>, 2016. Names of participants listed on the completed Consent, Release and Waiver Forms will have their names entered in a draw for an opportunity to win prizes.

For additional information, please call City Services at 3-1-1.





# Two Hour Clean Up Blitz Group Registration

## Saturday, April 30<sup>th</sup>

Two Hour Clean Up Blitz (From 9 a.m. to 11 a.m.)

\*Please note that the Clean Up Blitz is only conducted on Saturday, April 30<sup>th</sup>. For alternate Clean Up Program registrations, please contact Environmental Services.

### **Registration Form**

	Registration Date:
	Must register by <b>April 22</b> <sup>nd</sup> . No late registration will be accepted.
	Group Name:
	Does your group have a current adoption agreement? YES NO
	Name of Group Leader:
	Mailing address:
	Telephone:
	E-mail address:
	Public roadside or public area requested to be cleaned:
	(no private property clean-up is permitted under this program)
<b>-</b> 4⊁	Supplies Required for Participants:
le Grand Sudbury	Garbage Bags Gloves Safety Vests Number of participants:
	Please ship my supplies to the following Citizen Service Centre (CSC)/location:
	Capreol CSC Dowling CSC Hanmer CSC Sudbury CSC
	Chelmsford CSC Garson CSC Lively CSC Environmental Services Office - 1805 Frobisher Stre



### **Program Requirements and Information**

#### One copy per group registration to be filled out by the group leader

- ✓ Every participant must read the enclosed safety tips.
- ✓ Every participant must read and sign the enclosed Consent, Release and Waiver Forms. These forms must be completed and returned, along with the safety vests, to any Citizen Service Centre or to the Environmental Services Office located at 1805 Frobisher Street no later than May 6<sup>th</sup>, 2016. Indicate the group leader name when dropping off Consent, Release and Waiver Forms and safety vests. Failure to return safety vests will result in the group/individual being billed for the replacement value.
- ✓ During the clean-up, please do not drag bags to one location. The bags should be left alongside the length of the road you have registered to clean to avoid bags breaking. Crews will be dispatched to collect bags from the curbside location of your registered clean-up area/road only.
- √ The Group Leader Registration and the Program Requirements and Information Sheets must be received by April 22<sup>nd</sup>, 2016. Fax these sheets to 705-671-1148, email to wastemanagement@greatersudbury.ca or mail to City of Greater Sudbury c/o Environmental Services Division, 1805 Frobisher Street, Sudbury, ON P3A 6C8.
- ✓ Clean Up groups who involve children under the age of 12 must supply 1 adult supervisor for every 5 (or less) children under the age of 12.
- ✓ Clean Up groups who involve children between the age of 12 and 17 inclusive, must designate a minimum of one adult (18 years of age or older) whose only role is to be a monitor for children between the ages of 12 to 17 inclusive. The monitor's main role is to watch over the children and provide safety, supervision and support during the Clean Up event. An alternate monitor must also be provided to relieve the designated monitor for any break periods or when needed. The alternate monitor will step in the moment the monitor's attention is drawn away from the children. The monitor cannot partake in the actual Clean Up as their duty is to monitor everyone under the age of 18.
- ✓ A "Monitor" label will be provided to attach to the safety vest worn by the designated monitor(s). It is recommended that the group consider the amount of traffic and the number and age of the children to decide how many monitors are required to watch over the children. The Clean Up group has the responsibility of maintaining constant monitoring of all children to maintain a safe operating environment.

#### ✓ I declare that:

1. I am '	י 18	years o	lc	or	over,
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- 2. I have read and understand the Program Requirements and Safety Tips, and
- 3. Lagree to the program requirements

Name (Please Print)	Signature
Witness Name (Please Print)	Witness' Signature

Personal information on this form is collected under the authority of section 10 of the *Municipal Act, 2001*, S.O. 2001, c.25 and will be used to enroll the participant in the City of Greater Sudbury's Clean Up Programs. Questions about the collection of your information may be directed to the Manager of Solid Waste and Administrative Services at P.O. Box 5000, Station A 200 Brady Street, Sudbury, ON P3A 5P3 or 1-705-674-4455, extension 4356.







### **Safety Tips**

For additional information, please call
City Services at 3-1-1

### **DOS**

#### **Individuals:**

- Wear gloves, thick-soled closed shoes, long pants and long-sleeved shirts
- Wear safety vests or bright colors for roadside cleanups
- ✓ Wear sunscreen and bug repellent
- ✓ Drink plenty of fluids and keep "quick energy foods" on hand
- ✓ Be aware of your surroundings and the potential hazards associated with them (e.g., passing cars, hazardous tree branches, poison ivy, broken glass, needles etc.)
- ✓ Use the "buddy system" ...work in teams of two or three to maximize safety
- ✓ Keep pre-moistened towelettes on hand and wash hands after the cleanup

#### **Group Leader:**

- Ensure Consent, Release and Waiver forms ave been read and signed
- Be aware of all known allergies of volunteers before participation
- ✓ Know emergency procedures, such as the location of the nearest emergency facility and how to quickly summon the police or an ambulance
- Have a first aid kit and cellular phone on hand
- ✓ If possible, have someone trained in CPR and/or First-Aid on hand
- ✓ Provide adequate adult supervision if you involve youth 12-17 years in litter removal
- ✓ Provide 1 adult to supervise every 5 (or less) children under the age of 12

#### **DON'Ts**

#### **Individuals:**

- Don't pick up hazardous materials such as hypodermic needles, sharp objects, old car batteries, condoms, animal carcasses or other unidentified, questionable objects
- X Don't overstuff bags
- Don't attempt to move large objects such as rusted car shells, old household appliances or swing sets on your own.
- Don't bring pets to events, as they may distract participants or even detract from the cleanup
- Don't enter swift moving water if doing a waterway cleanup
- X Don't overdo it physically
- Don't bring alcoholic beverages or consume alcohol during a clean-up

#### **Group Leader:**

- Don't schedule cleanups during peak pedestrian or traffic hours
- Don't conduct cleanups during extremely inclement weather
- Don't conduct cleanups near or around construction sites or heavy traffic areas



## Consent, Release and Waiver Form - Adult

### Warning! Please read carefully. One signed copy requested for each adult participant.

Group Name or Group Leade	r:		
I		, desire to participate voluntari	ily in the City of Greater Sudbury's
Two Hour Blitz Clean Up.			
I UNDERSTAND, AGREE AND	ACKNOWLEDGE:		
tools, lifting, etc; c) that while participating, I sh d) that it is my complete right doing so and that it is my obli e) that there exists the remote and, in very rare circumstance f) that there are risks, known a but knowing those risks, it is r g) that by participating in the this Program;	will undertake involve the nould use caution and we and responsibility to deagation to inform the proge possibility of injury includes, heart attack or even deand unknown, including my desire to participate as Program, I am assuming	ear appropriate clothing and protective equipmerease or stop should at any time I believe it to gram volunteers of my concerns or my symptouding abnormal blood pressure, fainting, and death as well cuts, infections, bruises and broken a risk of injury, heart attack or even death as a r	nent (gloves, safety vest); be unsafe to continue ms; lisorders of heart rhythm a bones; esult of my participation,
discomfort, leg cramps, nause	ea or other ailments affec	n should I experience any signs of lightheaded ting my health. n and by signing this Consent, Release and Waive	-
heirs, executors, administrator of its elected officials, employe Parties") of and from all claims respect of death, injury, loss o	s, successors and assigns, res, agents, servants and s r, demands, damages, cos r damage to my person c associated with this Pro	release, waive and forever discharge the City of ponsors, successors and assigns (hereinafter refets, expenses, actions and causes of action, whetor property however caused, arising by reason or property however caused.	Greater Sudbury and all erred to as the "Released ther in law or equity, in of my participation in this
I have read, understood and a	gree to the terms and co	nditions of the Consent, Release and Waiver For	m and the Safety Tips
in their entirety on this	day of	20	
Participant (Sign	ature)	Participant (Print Name)	Date
Participant Phone	Number		
Witness (Sign	ature)	Witness (Print Name)	 Date

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### Consent, Release and Waiver Form - Youth

#### Warning! Please read carefully. One signed copy required for each youth participant.

Group Name:		
Group Leader Name:		
1	, (name of Parent/Guardian) am authorized and request to	) have
	("my child"), date of birth: year	
month	day participate in the City of Greater Sudbury's Two Hour Blitz Clean Up.	

This form is to be completed by the parent or legal guardian of any youth that is under 18 years of age. Adults 18 years of age or older should complete the Consent, Release and Waiver Form for adults on the previous page.

#### I UNDERSTAND, AGREE AND ACKNOWLEDGE:

- a) that some of the activities my child will undertake involve physical exertion;
- b) that some of the activities my child will undertake involve the potential for injury and exposure to broken glass, sharps, use of tools, lifting and other possibly harmful substances;
- c) that while my child is participating, my child should use caution and wear appropriate clothing and protective equipment (gloves, safety vest, and proper footwear as supplied and or recommended by the Group Leader;
- d) that during my child's participation, it is my child's complete right and responsibility to decrease or stop participating at any time my child believes it to be unsafe to continue doing so and that it is my child's obligation to inform Program volunteers of my child's concerns or symptoms;
- e) that while participating there exists the remote possibility of injury including abnormal blood pressure, fainting, and disorders of the heart rhythm and, in very rare circumstances, heart attack or even death as well as cuts, infections, bruises and broken bones;
- f) that while participating there are risks, known and unknown, including a risk of infection, injury, heart attack or even death as a result of my child's participation, but knowing those risks, it is my desire to have my child participate as indicated herein;
- g) that choosing to have my child participate in the Program brings with it the assumption by me and by my child of the above stated potential RISKS and I ASSUME FULL RESPONSIBILITY to instruct my child about these RISKS and the choices available to him or her:
- h) that my child is free to withdraw and I am free to withdraw my child from the Program at any time. I agree to voluntarily withdraw my child from the Program if my child begins to experience any signs of lightheadedness, fainting, chest discomfort, leg cramps, nausea or other ailments affecting my child's health; and
- i) that I will review the Safety Tips with my child and ensure my child's understanding of the Safety Tips.

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I WARRANT that my child is physically, mentally and emotionally fit to participate in the Program.

The Parent/Guardian shall inform the Group Leader of any allergy or medical condition and supply him/her with any medication or devices and instructions associated with the medication or devices in the event that my child requires treatment.

IN CONSIDERATION OF the acceptance of my child in the Program and by signing this Consent, Release and Waiver Form for myself (or for a child that is under 18 years of age) I, for myself, my heirs, executors, administrators, successors and assigns, release, waive and forever discharge the City of Greater Sudbury and all of its elected and non-elected officials, employees, agents, servants and sponsors, and successors and assigns of and from all claims, demands, damages, costs, expenses, actions and causes of action, whether in law or equity, in respect of death, injury, loss or damage to my person or property however caused, arising by reason of my participation in this Program, or in any activities associated with this Program, notwithstanding that same may have been contributed to or occasioned by the negligence of the City of Greater Sudbury, its elected or non-elected officials, employees, agents or servants.

I have read, understood and agree to the terms	and conditions described in this Consent, Release	e and Waiver Form
and the Safety Tips in their entirety on this	day of , 2	
Parent/Legal Guardian Signature	Parent/Legal Guardian (Print Name)	Date
Parent/Legal Guardian Phone Number	Parent/Legal Guardian Cell Phone Number	
Witness Signature	Witness (Print Name)	Date
Emergency Contact Person (Print Name)	Emergency Contact Person's Cell/Home Phone Number	Emergency Contact Person's Work Phone Number

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