

Volunteer Waiver Form

Ι_	accept the following conditions, when		
vo	lunteering in the Canmore library:		
•	I understand the Canmore Public Library cannot guarantee the sar items. I will handle them with caution and take necessary health a to minimize risk for myself and others.	•	
•	I confirm that I, as well as all members of my household, do not currently have no experienced COVID-19 symptoms within the last 14 days.		
•	 I understand I need to sanitize my hands and wear a mask and maintain proper distancing wherever possible during my volunteer work in the library. 		
•	If I begin to feel unwell during my shift, I will inform staff immediately go home contact appropriate health authorities for further instruction.		
•	I understand that if I become ill the Library, Board & Staff will not be held responsible for my illness.		
	ning this form, I acknowledge that I am aware of the risks involved, protocols in place and give consent to offer my volunteer service to		
	Volunteer's Signature	 Date	