

# OKOTOKS



## Winter Snow Removal Program

RESIDENT INFORMATION

&

APPLICATION PACKAGE

Okotoks Family Resource Centre  
11 Cimarron Common, Okotoks, AB

Phone: 403.995.2626

Email: [familyresources@okotoks.ca](mailto:familyresources@okotoks.ca)

## How does the Adopt-a-Sidewalk Program work?

Volunteers (individuals, families, and groups) commit to removing snow from the sidewalk (and in some circumstances the driveway) of eligible community residents throughout the winter season.

Volunteers register and are screened through the Town of Okotoks Volunteer Services office. After this process, they are matched with a resident(s) in need of snow clearing in their neighborhood. The volunteer is committed to the same resident throughout the season but may assist more than one person if he/she chooses to.

## Am I eligible to apply for this service?

To be eligible to receive the Adopt-a-Sidewalk Program all the following criteria must be met:

- 1) Reside in Okotoks year round
- 2) Have no one residing in the home who is able to shovel
- 3) Be 80 years or older, **or** have a medical condition or disability which prevents participation in snow clearing activities (if under 80, must have a referral letter from a doctor, nurse, or social worker).
- 4) Income must not exceed \$27,690 for a single person or \$44,965 for a couple (based on line 150 of the Revenue Canada Notice of Assessment). These income levels are consistent with those used by the Alberta Government Senior's financial assistance program.

## What services are provided?

The Adopt-a-Sidewalk program aims to provide residents in need with regular snow removal during the winter season. Service may vary depending on the number of volunteers and the commitment they can make to the program. **We make every effort to ensure that qualifying residents are paired with a volunteer, but cannot guarantee service to any resident.** Other options for snow removal will be discussed if the program is unable to assist.

## Do I have to provide the tools?

Yes. It is the responsibility of the resident to ensure shovels, ice chippers, ice melt, etc. are available for the volunteer to use. Please have the tools easily accessible for the volunteer. Some volunteers may choose to use their own tools.

## How often will my property be cleared?

Volunteers are asked to clear snow within 24 hours of a snowfall, as per Traffic Bylaw 10-10. However as this is a volunteer program, and volunteers self-deploy around other commitments, there is no guarantee of service. If a volunteer cannot make it to the resident's home within 24 hours, the volunteer will contact the Okotoks Family Resource Centre to request a backup volunteer, or contact the resident to notify them of when they will be able to clear their snow.

## What areas of my property will be cleared?

When you apply to the program, staff at the Okotoks Family Resource Centre will discuss which areas of your property need snow removal. This is a good time to discuss any barriers or hazards that could impede the snow removal. Typically, the volunteers clear the front sidewalks and driveway of the resident's home. **It is the responsibility of the resident to ensure that their property is safe.**

## How do I know who will be coming?

Once a match has been arranged, a volunteer will receive your first name, full address and phone number. Staff will contact you and provide the name of your volunteer. The volunteer will also contact you to introduce themselves.

## Do you screen the volunteers?

All volunteers must complete a Town of Okotoks volunteer application process, which includes obtaining a criminal record check and vulnerable sector check prior to being approved. When a family or group is volunteering only the adult overseeing this will be screened as a volunteer. Although volunteers are screened, the Okotoks Family Resource Centre assumes no responsibility for their actions and requests that all residents exercise caution. We recommend that you do not invite volunteers to enter your home. Participants are encouraged to call with any concerns or questions.

## What if the volunteer fails to come?

On occasion, volunteers may not be able to shovel for a resident within 24 hours of a snowfall. In these instances, they are expected to contact the resident to notify them of when they can assist. If your volunteer has not come or you have not heard from them please call the Family Resource Centre. We will then follow up with the volunteer and if possible, arrange for a replacement. **Please do not directly contact the volunteer that has been matched to you.**

## Is there a fee for this service?

No. At no time should you be required to pay or give anything to your volunteer. If the volunteer requests this from you, please tell them that you will need to check with the Okotoks Family Resource Centre first. Call us immediately if you are asked for any money, goods, loans, food, favors or donations from your volunteer.

## How should I thank my volunteer for their service?

It is important to remember that your volunteer is taking time out of his or her day to help you, and giving recognition is a very important role that you play in the program. A simple and friendly thank-you is often the most rewarding sign of appreciation.

Some people write a thank-you card, or choose to give a small token gift at the end of the season, but these are not expected.

## How do I apply for this service?

- 1) Apply in person at the Okotoks Family Resource Centre (11 Cimarron Common)
- OR
- 2) Download the forms from the Town of Okotoks website [www.okotoks.ca](http://www.okotoks.ca)



## OKOTOKS ADOPT-A-SIDEWALK PROGRAM RESIDENT APPLICATION FORM

\*NOTE: DUE TO LIMITED RESOURCES AVAILABLE, THERE IS NO GUARANTEE THAT ALL APPLICANTS WILL RECEIVE THIS SERVICE\*

### APPLICANT CONTACT

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone 2: \_\_\_\_\_

Email: \_\_\_\_\_

Who else resides in the home with you? \_\_\_\_\_

### EMERGENCY CONTACT

Full Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone 2: \_\_\_\_\_

### CRITERIA AND DISCLOSURE

Yes	No	I reside in Okotoks year round
Yes	No	There is no one residing in my home who is able to shovel
Yes	No	My household meets the low income guidelines. Household annual income*: _____ *please provide proof of income
Yes	No	I am 80 years of age or older
Yes	No	I am under 80 years of age but have a medical condition or disability which prevents participation in snow clearing activities. <i>Please provide a referral letter from a licensed doctor, nurse, or social worker if this applies to you.</i>
Yes	No	I have read the information package and I am aware: That I am ultimately responsible for the safety of my property That volunteers are screened, but I should exercise caution This program utilizes volunteers and there is no guarantee of service That I should have any tools/equipment needed to clear my snow easily accessible
Yes	No	I consent to the Town of Okotoks providing my first name, address and telephone number to a matched volunteer.
Yes	No	I have read and signed the Town of Okotoks Waiver form.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The personal information on this form is being collected under the authority of section 33(c) of the *Freedom of Information and Protection of Privacy Act* (FOIP) and will be used for the administration of the Okotoks Snow Angel Program. Should you have any questions regarding the collection and use of your personal information, contact the FOIP Coordinator at foip@okotoks.ca or 403-938-8944.



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 Okotoks Adopt-a-Sidewalk Program 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 Town of Okotoks or its council, officers, employees, agents, invitees, volunteers 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: \_\_\_\_\_

Participant Signature: \_\_\_\_\_

Witness Name (print): \_\_\_\_\_ Witness Signature: \_\_\_\_\_