



## Woodlands and Waterways EcoWatch – Ontario Benthos Biomonitoring Network Training Registration Package

### Woodlands and Waterways EcoWatch

The Woodlands and Waterways EcoWatch (WWEW) is a community based environmental monitoring program coordinated by U-Links Centre for Community Based Research in conjunction with a number of volunteer organizations in the Haliburton Region. We are looking to grow our program by incorporating citizen scientist volunteers to assist in the collection and analysis of benthic macroinvertebrates (benthos).

Benthos are aquatic spineless organisms that live on the bottom of water bodies. Due to their sedentary behavior and sensitivity to stressors, they are often used as biologic indicators for common aquatic pollutants. WWEW uses the Ontario Benthic Biomonitoring Network (OBBN) protocol for sampling and processing of benthos data.

To ensure all our volunteers are following standard protocols we are offering a 4-session training course for OBBN protocol with the opportunity to receive your full certification!

## Participant Information

Name:

Phone:

Email:

Affiliation/Organization:

Are you 18 years of age or older: Yes / No

Have you received your third booster shot of a Health Canada-approved vaccine a minimum of 7 days in advance of the outdoor training session: Yes / No

Tell us a little about yourself:

## Course Fee's

In previous years with support from grant funding, U-Links was able to offer this certification course free-of-charge to interested participants, however discrepancies in funding sources happen where expected revenue does not arrive. This year, we are able to offer a subsidized cost of \$150.00 + HST per participant, on par with the course rate for Conservation Authority employees in Ontario (discounted from \$300.00 + HST standard rate).

## Course Preparation

Training Schedule:

The course will take place over 4 days, 2 Virtual Sessions and 2 In-Person Sessions:

Day 1 – Wednesday July 10, 2024 – Virtual Session – 9:00am – 2:30pm

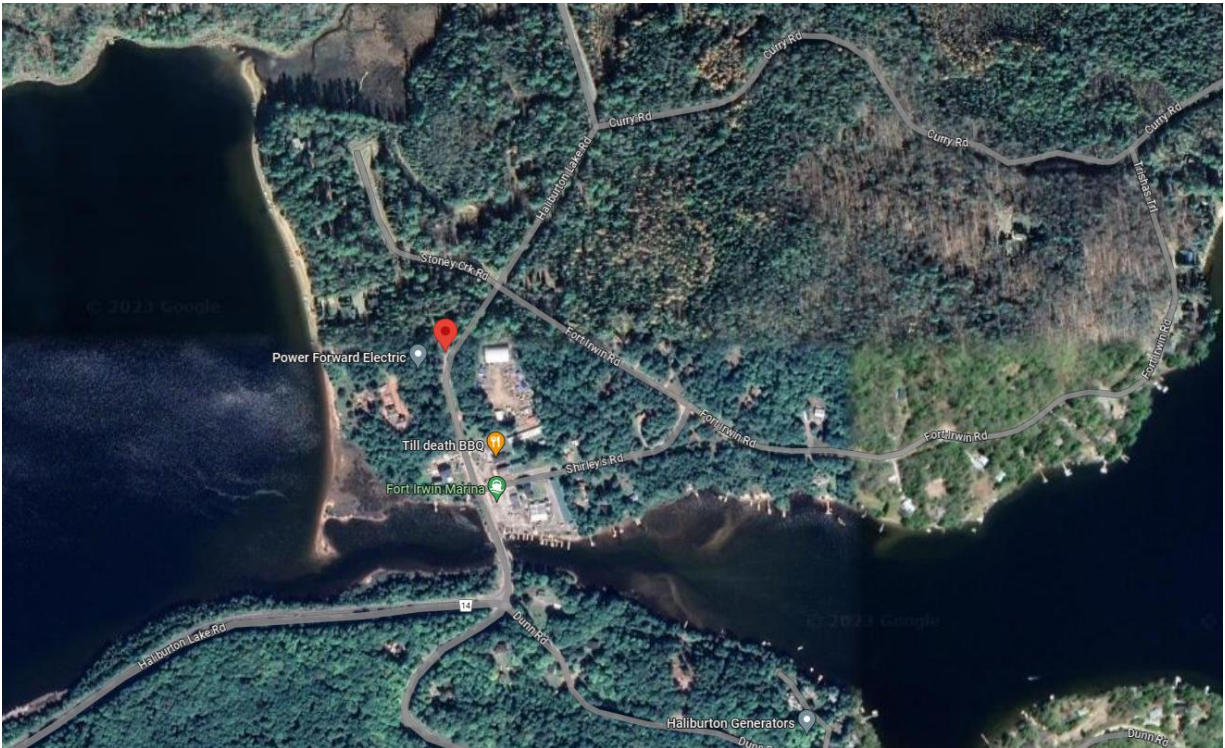
Day 2 – Tuesday July 23, 2024 – Field Session – 9:00am – 3:30pm

Day 3 – Wednesday July 24, 2024– Certification Testing– 9:00am – 2:00pm

## Location

The first session will be held on-line through Zoom. The second two sessions will be held at the Haliburton Lake Cottagers Association Hall in Haliburton County, North of the Fort Irwin Marina on Haliburton Lake. Facility includes access to washrooms, and indoor seating.

Haliburton Lake Cottagers Association Hall - 5041 Haliburton Lake Road



## Transportation and Parking

All participants are responsible for their own transportation to field sites. Carpooling is encouraged. Parking is available at Haliburton Lake Cottagers Association Hall - 5041 Haliburton Lake Road

## Equipment and Gear

Remote Session, all participants must have an operational computer with the following:

- Stable internet connections
- Headset or built-in microphone and video camera
- Adequate storage space for downloading and viewing course materials in a variety of formats (including PowerPoint, WORD, .pdf, and media files), either synchronously or asynchronously

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| <p><b>In-Person Session</b></p> <ul style="list-style-type: none"> <li>- Be prepared to be outside for the majority of the day in all weather conditions.</li> <li>- Long pants and close-toed shoes are required</li> <li>- If you have chest waders please bring them, some will be provided if you don't (Please indicate what size you will need if applicable – *sizing based on shoe size)</li> <li>- If you have a PFD please bring it, one will be provided if you don't</li> <li>- Bring a lunch and water</li> </ul> | <p><b>Recommended Gear (Field Session)</b></p> <ul style="list-style-type: none"> <li>- Backpack</li> <li>- Cell Phone/Camera</li> <li>- Notebook/clipboard</li> <li>- Mosquito/tick repellent</li> <li>- Sunscreen</li> <li>- Hat</li> <li>- Water bottle</li> <li>- Lunch</li> </ul> |
| <p>Course Materials<br/> Course Materials will be provided on Day 1 of the in-person training sessions on July 23.</p>   |  |

# Activity Waiver

## PLEASE PRINT/TYPE

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

Mailing Address: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## Emergency Information

### *Emergency Contact*

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

Relationship: \_\_\_\_\_

Telephone: \_\_\_\_\_

Alternate Telephone: \_\_\_\_\_

### *Medical Disclosure*

Please disclose any medical conditions or health concerns that you may have that would be important to disclose to EMS personnel in the event that you sustain an injury:

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Benthic macroinvertebrate sample collection requires strenuous physical activity including but not limited to: wading backwards in water up to 1 meter deep with uneven footing, kicking up rocks and sediment for periods of up to 10 minutes continuously, among other physical activities in various weather conditions.

Please disclose any medical conditions or health concerns that may impede your ability to perform these actions:

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*Personal information collected above is for administrative and emergency use only. It will not be used for other purposes.*

**Release of Liability**

I, the Volunteer, my personal representatives, assigns, heirs and next of kin, freely and voluntarily, without duress, hereby release, waive and discharge all claims that I have or may have in the future against U-Links and the Haliburton County Community Co-operative, as well as its officers, directors, agents, servants, volunteers or employees (hereinafter referred to as "Releasees") from any and all liability, claims, loss, expenses, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, any of the property belonging to me or that my next of kin may suffer as a result of my participation as a volunteer, whether caused by the negligence of the Releasees, or otherwise, including any liability, claim, demands, damages, action suits of any nature based in negligence, breach of fiduciary duty, breach of contract or breach of any statutory or other duty of care, while participating in such a volunteer activity, or while in, on, or upon the premises where the volunteer activity is being conducted.

**Indemnity**

I agree to indemnify and hold harmless the Releasees and their respective successors and assigns from any and all liability, claims, demands, causes of action, losses, damages or costs of whatever kind or nature, either in law or equity, whether foreseen or unforeseen, arising from my actions as a volunteer, for any damage to property of, or personal injury to, any third party, resulting from my participation as a volunteer and for any costs involved in connection with such claims. I, the Volunteer, understand that this Release discharges U-Links and the Haliburton County Community Co-operative from any liability or claim that I may have against U-Links and the Haliburton County Community Co-operative with respect to any bodily injury, personal injury, illness, death, or property damage that may result from my activities with U-Links whether caused by the negligence of the Releasees. I, the Volunteer, covenant not to bring any action against U-Links and the Haliburton County Community Co-operative for any such injury or damage.

**Medical**

If I am unable to consent at the time due to injury or illness, I hereby consent to the administration of first aid and other emergency medical treatment for such injury or illness that occurs during any of my volunteering. Should a medical emergency arise, and I am unable to give permission at the time, I hereby authorize any medical and/or surgical care, including diagnosis and treatment, to be given by any hospital or clinic selected by U-Links. Further, I hereby release and forever discharge the Releasees from any claim whatsoever which arises or may hereafter arise on account of any first aid treatment or other medical services rendered in connection with an emergency during my participation as a Volunteer.

**Email Correspondence**

I understand that the U-Links and the Haliburton County Community Co-operative will not share my personal information with third parties.

I HAVE READ AND UNDERSTAND THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST THE RELEASEES.

I understand that if I have any questions regarding this Agreement, I should consult a lawyer prior to executing the Agreement.

\_\_\_\_\_  
Volunteer signature

\_\_\_\_\_  
Parent/ Guardian Signature (if under 18)

\_\_\_\_\_  
Date signed on

**Photo/Audio Recording/Media Release**

I understand and agree that all photographs, video, audio recordings or any images or portions thereof, taken by the Releasees during my participation as a Volunteer, are the property of U-Links and may be used, modified and/or published in any manner U-Link considers appropriate, without my permission. I grant and convey unto FBYS all right, title and interest in any and all photographic images and video or audio recordings made by the Releasees during my participation as a Volunteer, including, but not limited to, any moral rights, royalties, proceeds, or other benefits derived from such photographs or recordings. I also waive any and all rights, including moral rights I have in the photographic images and video or audio recordings made by any of U-Links's assignees and licensees.

\_\_\_\_\_  
Volunteer signature

\_\_\_\_\_  
Parent/ Guardian Signature (if under 18)

\_\_\_\_\_  
Date