



## Volunteer Land Steward Application Form

Date		
Full Name		Pronouns
Address	City	Postal Code
E-mail	Daytime phone	Evening phone
Occupation	Are you over 18 years of age? Yes <input type="checkbox"/> No <input type="checkbox"/>	If under 18, please provide parental/guardian consent at end of this form.
Emergency contact name	Relationship	Phone
Are you a Fish and Game Member?  Yes <input type="checkbox"/> No <input type="checkbox"/>	List club(s) of which you are a member.	
Are you a community-based service or interest club or organization?  Yes <input type="checkbox"/> No <input type="checkbox"/>	List group(s) of which you are a member.	
Are you applying as a group?  Yes <input type="checkbox"/> No <input type="checkbox"/>	List contact information for all members of your group.	
	Name	Contact information
1.		
2.		
3.		
4.		
5.		
Are you applying for a specific Wildlife Trust Fund Property?  Yes <input type="checkbox"/> No <input type="checkbox"/>	List specific property or specific criteria you hope to be matched to (i.e., close to home, grazing land, wetland area).	
Are you willing to work with existing stewards if already established?  Yes <input type="checkbox"/> No <input type="checkbox"/>		
Do you have any specific skills, training or interest that may be beneficial to the		



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WILDLIFE  
FEDERATION**



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HABITAT  
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<p>overall stewardship program such as the ability to run power equipment, operate weed sprayer, chainsaw, tractor, quad?</p>	
<p>Do you have any education or training that would be beneficial to the overall stewardship program? That is, biological background, field naturalist, specific training?</p>	

As an applicant, I understand that volunteer placement is based on program requirements and the skills and experience of the applicant. I agree to read the Volunteer Land Stewardship Manual and participate in Alberta Wildlife Federation Volunteer Land Stewardship training before commencing my duties as a Volunteer Land Steward.

<p>Signature of applicant</p>	<p>Date</p>
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For a Volunteer under the age of 18:

As the parent/guardian of the applicant, I give permission for my child/ward to complete the duties of Volunteer Land Steward as outlined in the Volunteer Land Stewardship Manual. I acknowledge that I will complete the Volunteer Land Stewardship training with my child/ward. I acknowledge my child/ward has the skills and experience to meet the program requirements. As the parent/guardian of the applicant, I will accompany my child/ward and supervise them in their Volunteer Land Stewardship tasks.

<p>Signature of parent/guardian</p>	<p>Date</p>
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Please submit your Volunteer Land Stewardship Application to:

Alberta Wildlife Federation

13045 - 156 Street | Edmonton, AB | T5V 0A2

[www.AlbertaWildlifeFederation.ca](http://www.AlbertaWildlifeFederation.ca) | [programs@AlbertaWildlifeFederation.ca](mailto:programs@AlbertaWildlifeFederation.ca)

Office: 780-437-2342