

Application for PSkF Volunteer Insurance Plan

VIP- Streamkeepers Volunteer Insurance Program for members of the Pacific Streamkeepers Federation
One application for each society is to be completed. If you are part of an Umbrella organization, please complete one application per society.

NAME OF SOCIETY/CLUB: _____

CONTACT NAME: _____

PHONE: _____ FAX: _____ EMAIL: _____

MAILING ADDRESS: _____

EFFECTIVE DATE: _____ EXPIRY DATE: April 15, 2012

*all policies expire at 12:01am April 15, of every calendar year

ARE YOU A PACIFIC STREAMKEEPERS FEDERATION MEMBER IN GOOD STANDING? _____

IS YOUR GROUP A REGISTERED NON-PROFIT ORGANIZATION ? NO ___ YES # _____

DATE OF INCORPORATION: _____

TOTAL NUMBER OF VOLUNTEERS: _____

(please attach a list of all volunteers. Please remember that any person paid by the organization does not qualify for this Volunteer Insurance Plan and it is recommended that WCB is set up for these employees)

STREAMKEEPERS HANDBOOK AND MODULES: (please tick all that apply to your organization)

- Module 1- Introductory Stream Habitat Survey
- Module 2 – Advanced Stream Habitat Survey
- Module 3- Water Quality Survey
- Module 4- Stream Invertebrate Survey
- Module 5 – Storm Drain Marking
- Module 6 – Stream Clean-up
- Module 7 – Streamside Planting – Including Invasive Species Removal
- Module 8 – Streamside Fencing
- Module 9 – Observe, Record and Report
- Module 10 – Community Awareness
- Module 11 – Juvenile Fish Trapping and Identification
- Module 12 – Salmonid Spawner Survey
- Module 13 – Creel Survey
- Module 14- Stream Channel Improvement

If involved in Module 14, please elaborate as to your projects on a separate sheet

LIST OF ALL ACTIVITIES
(ATTACH SEPARATE SHEET IF NESESARRY)

ARE WATERCRAFT USED AS ANY PART OF YOUR OPERATIONS: (if yes, please explain)

DO YOU OWN/ OPERATE/ LEASE ANY SPACE/LAND/HATCHERY Etc? (if yes please explain)

*****PLEASE NOTE THAT ANY ACTIVITIES INVOLVING AIRCRAFT ARE SPECIFICALLY EXCLUDED*****

DO YOU REQUIRE PROPERTY COVERAGE FOR ANY CONTENTS OR BUILDINGS ? _____
(IF YES PLEASE CONTACT UNDERWRITERS INSURANCE BROKERS LIMITED FOR A PROPERTY APPLICATION (604-734-2124)

ANY SPECIAL EVENTS OVER 50 PEOPLE MUST BE SUBMITTED ON A SEPARATE SPECIAL EVENT APPLICATION AND IS SUBJECT TO AN ADDITIONAL PREMIUM. CONTACT US AT 604-734-2124

Additional Named Insured: Fisheries and Oceans Canada, (you may wish to add your Municipality here)

PRINT NAME AND TITLE: _____

SIGNATURE: _____

DATE: _____

Mail to : The Pacific Streamkeepers Federation

1858 Beaulynn Place

North Vancouver, BC V7J 2T1