

**Saugeen Bruce Peninsula Invasive Species Collaborative  
PARTICIPATION FORM**

Email the completed form to: [saugeenpeninsulacollaborative@gmail.com](mailto:saugeenpeninsulacollaborative@gmail.com) (preferred method)

OR mail to: c/o Nature Conservancy of Canada, PO Box 917, N0H 1W0

<b>LANDOWNER</b> <i>(FIRST AND LAST NAME)</i>	
<b>LANDOWNER PHONE NUMBER(S)</b>	
<b>LANDOWNER EMAIL</b>	
<b>CIVIC ADDRESS</b>	
<b>TAX ASSESSMENT ROLL #</b> <b>(INCLUDE ALL APPLICABLE TRN'S)</b>	
<b>MAILING ADDRESS</b> <b>(IF DIFFERENT THAN CIVIC)</b>	
<b>IF THE LANDOWNER IS NOT THE PRIMARY RESIDENT, PLEASE PROVIDE THE NAME AND PHONE NUMBER FOR THE TENANT.</b>	
<b>POINT-OF-CONTACT / TENANT</b> <i>(FIRST AND LAST NAME)</i>	
<b>POINT-OF-CONTACT PHONE NUMBER(S)</b>	

**PERMISSION TO ACCESS PRIVATE PROPERTY – CHOOSE ONE OPTION FROM EACH SECTION BELOW**

<input type="radio"/>	<b>I support</b> the Saugeen Bruce Peninsula Invasive Species Collaborative (SPISC) and I grant permission for members of the SPISC to access my property, with prior notification at mutually-agreeable times, to identify and map invasive <i>Phragmites</i> , Garlic Mustard, Common Buckthorn, and Dog-Strangling Vine for the purpose of informing a regional control program for the Saugeen Bruce Peninsula. If these species are located on my property, I understand that only data needed to inform the control of this species will be collected. I understand that detailed control methods with timelines for control work will be shared with me prior to implementation on my property and that I reserve the right to withdraw my permission for property access at any time.
<input type="radio"/>	<b>I prefer not to support</b> the Saugeen Bruce Peninsula Invasive Species Collaborative (SPISC) and I <b>do not</b> grant permission for members of the SPISC to access my property

**CONTROL AND MANAGEMENT PREFERENCES, IF INVASIVE SPECIES IS LOCATED ON YOUR PROPERTY**

<input type="radio"/>	I acknowledge that chemical control is the most effective and efficient approach for managing invasive plants growing in dry conditions and I support the use of herbicide on my property in accordance with Ontario's Best Management Practices and an Ontario Ministry of Natural Resources and Forestry Pesticides Act exemptions as long as I am notified and kept up-to-date on timing of application.
<input type="radio"/>	I prefer no chemical control on my property at this time but will authorize manual control activities.
<input type="radio"/>	I have a pesticide exterminator license and would be interested in assisting with control of invasive species on my property, and/or I would like to assist with manual control activities.

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

**[saugeenpeninsulacollaborative@gmail.com](mailto:saugeenpeninsulacollaborative@gmail.com)**

The information collected on this form will not be shared.  
The information is collected for the sole purpose of facilitating the control and management of *Phragmites* on the Saugeen Bruce Peninsula.