



GROUP VOLUNTEERS

I, _____, acknowledge that I am an adult over age eighteen (18) years in a leadership or supervisory capacity for the following group providing volunteer services to Marshall County Recycle Depot, Marshall County, Indiana:

I acknowledge and agree that I solely responsible for supervising and maintaining the safety of any volunteers in my group under the age of eighteen (18) years and for using and operating any equipment in connection with the performance of volunteer services in a safe manner, in compliance with any operating instructions and warnings. By signing below, I express my understanding and intent to enter into this Waiver and Release of Liability freely and voluntarily.

Date: _____

Signature

Printed Name