



Reduce. Reuse.
Recycle!
It starts with you.
CALHOUN COUNTY, MICHIGAN

Team Green Application

Calhoun County's Solid Waste Program aims to reduce the dependence on landfills by offering recycling opportunities and education to county residents about reducing waste. We extend an opportunity for you to be part of our success.

PLEASE PRINT:

Name: _____

Address: _____

Phone #: _____ - _____ - _____

Email: _____

Volunteer Type: Individual Group/Organization

What volunteer opportunities interest you?

- Albion Recycling Center (Monday, Wednesday, Saturday)
- Marshall Recycling Center (Tuesday, Thursday, Saturday)
- Recyclerama (Saturday)
- Special Collections (Styrofoam #6 and Scrap Tires)

Day(s) of availability to volunteer (please circle):

Monday Tuesday Wednesday Thursday Friday Saturday

Calhoun County Community Development Department – Solid Waste Program, 315 W. Green St., Marshall, MI 49068.

Phone: 269-969-6395

www.calhouncountyrecycling.com

CALHOUN COUNTY VOLUNTEER AGREEMENT

Calhoun County and _____ (hereinafter "Volunteer") agree that in consideration for the opportunity to provide volunteer services at the Marshall Recycling Center ("Center"), the following terms shall apply:

- 1. The Volunteer agrees that he/she is not an employee of Calhoun County and is not entitled to receive salary, benefits, or other compensation of any type relative to any services provided at the Center. The Volunteer understands that he/she does not qualify for workers' compensation benefits and shall carry personal medical insurance to cover medical expenses for any injuries he/she incurs while performing volunteer services.
- 2. Volunteer releases and holds harmless Calhoun County, with its elected and appointed board members, officials, employees, agents, and representatives, from any responsibility or liability for personal injury, including death, and damage to or loss of property, that Volunteer may incur due to the negligence of Calhoun County, with its elected and appointed board members, officials, employees, agents, and representatives of the County while Volunteer is engaging in activities pursuant to this Agreement.
- 3. This Agreement contains the complete expression of the agreement between the Volunteer, and the County on the subjects contained herein and there are no other oral or written agreements or understandings between the entities and Volunteer concerning these subjects. Any prior agreements or understandings on the matters addressed in this Agreement are hereby rescinded, revoked or terminated. This Agreement may be modified or amended only by subsequent written agreement approved by the authorized representatives of the County.

Calhoun County

By:


Kelli Scott

Its: Administrator/Controller

Date: _____

Volunteer

Sign: _____

Print Name: _____

Date: _____

If the Volunteer is under the age of 18, the signature of the Volunteer's Parent or Guardian is required and by signing below the parent or guardian agrees that he/she has read the Volunteer Agreement, agrees to the same, and is signing said agreement on behalf of the Volunteer:

Parent/Guardian signature: _____

Print Name: _____

Date: _____