

CITY OF ALBION VOLUNTEER AGREEMENT

The City of Albion and _____ (hereinafter "Volunteer") agree that in consideration for the opportunity to provide volunteer services at the City of Albion ("City"), the following terms shall apply:

1. The Volunteer agrees that he/she is not an employee of the City of Albion and is not entitled to receive salary, benefits, or other compensation of any type relative to any services provided on behalf of the City. 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 the City of Albion, together with their 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 the City of Albion, together with the elected and appointed board members, officials, employees, agents, and representatives of the City of Albion 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 City, 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 Any prior agreements or understandings on the matters addressed in this Agreement are hereby rescinded, revoked or terminated.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 City.
4. This agreement shall be construed under the laws of the State of Michigan. Any and all claims, disputes, lawsuits, controversies, actions, or litigation arising out of this agreement shall be brought in either the 10th District Court or 37th Circuit Court for Calhoun County, Michigan.

IN WITNESS WHEREOF, the parties have executed this Volunteer Agreement as of the date below.

VOLUNTEER

CITY OF ALBION

Sign: _____

By: _____

Print Name: _____

Sheryl Mitchell
Its: City Manager

Date: _____

Date: _____

School/Group _____