

# Volunteer Waiver and Release Statement

Your safety is of the utmost concern to Valley Community for Recycling Solutions (VCRS). Please read the following carefully, INITIAL each italicized paragraph and sign at the end.

**1a.** *I acknowledge that I am at least 13 years old and am under the age of 18 and that I am expressly prohibited from operating any plant equipment and from working in the area of or around the baler.* \_\_\_\_\_

OR

**1b.** *I acknowledge that I am 18 years of age or older and that I am expressly prohibited from operating any plant equipment unless I have the appropriate certification and training in its use, and only with the express permission and under the supervision of the Operations Manager.* \_\_\_\_\_

**2.** *I acknowledge that the Community Recycling Center is an industrial plant with potential hazards arising from: (1) the operation of heavy equipment including forklifts, front end loader and baler; (2) the potential for cuts from metal cans; (3) inhalation of dust as the ground is not black-topped; (4) other substances that people may bring in with their recyclable materials; (5) the movement of vehicles.* \_\_\_\_\_

**3.** *I acknowledge that VCRS has provided me with the following safety equipment and that I am responsible for ensuring that I use them: reflective vest; gloves; and if working around the baler, ear protectors and eye goggles.* \_\_\_\_\_

**4.** *I acknowledge that VCRS expressly prohibits anyone from having alcohol or any illegal substances on the premises or from being under their influence and has a zero tolerance policy with respect to same.* \_\_\_\_\_

**5.** *I acknowledge that VCRS strictly prohibits anyone from making threats or acts of violence against co-workers, supervisors, staff or any member of the public and that I have a "duty to warn" the Floor supervisor or Community Outreach Coordinator if I observe or become aware of any situation or incident that appears problematic.* \_\_\_\_\_

**6.** *I acknowledge that VCRS considers material brought to VCRS for recycling as private and personal; I will not read private or personal material; I will not take private or personal material off the premises of VCRS.* \_\_\_\_\_

**7.** *I understand that VCRS is a smoke free facility and that this includes all VCRS property and structures, indoors and outdoors. **Smoking is absolutely not allowed.** I understand that the consequences of smoking on the property are grounds for immediate termination of volunteering at the recycling center.* \_\_\_\_\_

**8.** *I acknowledge that for safety reasons, cell phones and other electronic devices are not to be used while working at VCRS, and I will not use a cell phone or other electronic devices. If someone needs to contact me, I will have them call the office at 745-5544.* \_\_\_\_\_

I hereby acknowledge that I am aware of the potential dangers mentioned in this waiver and other dangers common in many workplaces and agree that I voluntarily encounter any hazards that may arise. I agree that I will not hold VCRS responsible for any injury or illness I may suffer while working as a volunteer, even if that injury is caused by the neglect or inattention of VCRS or other volunteers or by the public. This includes all hazards even those not specifically mentioned in this waiver. I understand that it is my own responsibility to make sure I have the necessary safety equipment before I start performing any volunteer work. I agree that I will pay attention to and obey the rules VCRS may set, and the instructions of VCRS representatives and I understand that this is necessary to protect me from hazards.

I understand the nature of the Community Recycling Center and the duties expected of me and I am willing to perform these duties. Duties may include sorting recyclables, lifting and moving bags of recyclables, transporting bags of recyclables to and from vehicles, and talking with the public about recycling.

I agree to leave the premises immediately if directed to do so by a VCRS representative.

**I affirm that I have read this Volunteer Waiver and Release Statement, understand it, and agree to sign it as my free and voluntary act.**

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**If you are not 18 years of age, a signature from a parent or legal guardian is also required.**

Printed Name of Parent/Guardian: \_\_\_\_\_ Relationship to Volunteer: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: **Work:** \_\_\_\_\_ **Home:** \_\_\_\_\_ **Cell:** \_\_\_\_\_