LIABILITY RELEASE

I, _____(printed name), acknowledge that I am volunteering my time and/or services to the Village of Bancroft, Michigan, a Michigan municipality. I do so freely, voluntarily and with the understanding that I will NOT receive any financial or other compensation for my time or services. I understand that I am NOT an employee of the Village of Bancroft, a Michigan municipality, NOR will I receive any type of compensation generally associated with employment, including but not limited to wages, federal or state tax contribution, vacation time, pension, 401K contribution, severance package, seniority, health insurance, life insurance, disability coverage, nor workers compensation benefits. Since I am NOT a Village employee, I may NOT be covered under any Village insurance policy and I may NOT be protected by governmental immunity. Village employees may receive liability or disability protection that is NOT available to me. I also understand that I will NOT be receiving any other compensation including property tax credits, NOR free or reduced utilities.

If I am a minor, my parent or legal representative shall execute this Release on my behalf. I understand that I am under no legal obligation to sign this Release. I understand that if I refuse to enter into this Release that I will not be allowed to volunteer my time or services.

By signing below, I understand terms above and agree to be bound by them.

Dated: _____ Signed: _____

Address: _____

City/State/Zip: _____

Phone: _____