



Edgewood Police Department

Release-Waiver of Liability and Indemnification Agreement

PLEASE READ CAREFULLY BEFORE MAKING A DECISION WHETHER TO SIGN

I, _____, the Parent/Guardian of, _____
in consideration of being permitted to participate in the Edgewood Jr. Police Academy, hereby acknowledge and agree
as follows:

I understand that I am subjecting myself/my child to certain risks and hazards, including serious bodily injury, illness, and even death; that these and other risks and hazards may be caused by the actions or inactions of myself/my child, the conditions existing at the time, the negligence of the Pierce County Sheriff's Office and the City of Edgewood, its employees or others, and that there may be other risks and hazards either known or unknown or not foreseen at this time. I fully understand these risks and assume all risks of injury or harm associated with my participation in the Edgewood Jr. Police Academy.

I understand that myself/my child's involvement in these activities is entirely voluntary, and I freely choose for myself/my child to participate.

I acknowledge that the City of Edgewood and the Pierce County Sheriff's Office do not provide any kind of medical coverage for me or my child, in the event of injury, illness, or death as a result of participation in these activities. In addition, I understand that the City of Edgewood and the Pierce County Sheriff's Office do not assume any responsibility for and have no obligation to provide financial or any other assistance, including but not limited to medical, health or disability insurance, in relation to my participation in the Edgewood Jr. Police Academy.

Furthermore, while participating in the Edgewood Jr. Police Academy, myself/my child agree to abide by all policies, procedures, instructions and training associated with such activity, and we will make safety our primary concern and at all times use and implement proper procedures and precautionary measures. Myself/my child understands the risks and hazards as described in this agreement are present even if all safety precautions are followed, and that such safety precautions do not guarantee myself/my child safety while participating in the Edgewood Jr. Police Academy.

I understand that the City of Edgewood and the Pierce County Sheriff's Office, their employees, officers, officials, and agents may take and use any photographs, video or audio recordings, digital images, or other such documentation of myself/my child for educational, promotion and advertising purposes for the Edgewood Jr. Police Academy, and give my permission for such activities. I understand that I will not receive monetary enumeration for any use of participant's likeness, or any recordings described herein. I also understand that the City of Edgewood and the Pierce County Sheriff's Office exclusively own all rights to such photographs, video or audio recordings, digital images or other documentation, and to any derivative works created from them.

I understand and agree that during the course of myself/my child's participation in the Edgewood Jr. Police Academy, we may have access to confidential information. I understand and agree that neither myself/my child will disclose or share such information to any person without prior approval of the City of Edgewood or Pierce County Sheriff's Office.

If any parts, terms or provisions of this agreement are held by the courts to be unlawful, the validity of the remaining portions or provisions shall not be affected.

I fully understanding the risks involved and the opportunity myself/my child are being afforded and by my signature on page two (2) of this agreement, I agree to the following Release, Waiver of Liability and Indemnification:

Edgewood Police Department

Release-Waiver of Liability and Indemnification Agreement

RELEASE, WAIVER OF LIABILITY AND INDEMNIFICATION

IN CONSIDERATION OF THE OPPORTUNITY TO PARTICIPATE IN THE EDGEWOOD JR. POLICE ACADEMY, I HEREBY WAIVE AND RELEASE THE CITY OF EDGEWOOD, AND THE PIERCE COUNTY SHERIFF'S OFFICE, THEIR EMPLOYEES, OFFICERS, OFFICIALS AND AGENTS FROM ANY AND ALL LIABILITY, CLAIMS, DEMANDS, LOSSES OR DAMAGES RESULTING TO MYSELF/MY CHILD AS A CONSEQUENCE OF OUR PARTICIPATION AND/OR ACTS OF NEGLIGENCE DURING THE EDGEWOOD JR. POLICE ACADEMY. IN FURTHER CONSIDERATION OF THE OPPORTUNITY TO PARTICIPATE IN THE ACADEMY, I AGREE TO HOLD HARMLESS, INDEMNIFY, ANSWER AND DEFEND THE CITY OF EDGEWOOD AND THE PIERCE COUNTY SHERIFF'S OFFICE, THEIR EMPLOYEES, OFFICERS, OFFICIALS AND AGENTS FROM ANY AND ALL ACTIONS, CAUSES OF ACTION, CLAIMS AND ANY LIABILITIES, LOSS, DAMAGES OR COSTS WHATSOEVER, KNOWN OR UNKNOWN, WHICH MAY ARISE ON ACCOUNT OF ACTS OF NEGLIGENCE AND/OR IN ANY WAY BE RELATED TO MY/MY CHILD'S PARTICIPATION IN THE ACTIVITIES DESCRIBED HEREIN AND MY/MY CHILD'S PARTICIPATION IN THE EDGEWOOD JR. POLICE ACADEMY. IN ADDITION, I HEREBY WAIVE AND RELEASE THE CITY OF EDGEWOOD AND THE PIERCE COUNTY SHERIFF'S OFFICE FROM ANY CLAIMS THAT MAY ARISE FROM PHOTOGRAPHS, VIDEO OR AUDIO RECORDINGS, DIGITAL IMAGES, OR OTHER SUCH DOCUMENTATION TAKEN AND/OR USED AS DESCRIBED HEREIN, INCLUDING WITHOUT LIMITATION, CLAIMS OF DEFAMATION, INVASION OF PRIVACY, OR INFRINGEMENT ON RIGHTS OF COPYRIGHT.

I acknowledge that I have read this two (2) page Release, Waiver of Liability and Indemnification agreement and that I fully understand it.

Name of Parent/Guardian

Signature of Parent/Guardian

Child's Name

Date

Emergency Contact (2)

Name: _____

Phone # _____

Name: _____

Phone # _____