BALTIMORE COUNTY POLICE DEPARTMENT
YOUTH LEADERSHIP ACADEMY
WAIVER AND RELEASE OF RESPONSIBILITY

This is a LEGAL DOCUMENT – Do not sign unless you fully understand the terms and conditions contained herein.

This Form MUST be returned before the first Class.

Name of Participant: _____

For the consideration of being allowed to participate in the Baltimore County Police Department's Youth Leadership Academy and for other valuable consideration, the receipt of which is hereby acknowledged, I, my agents, heirs, assigns, executors, personal representatives and/or administrators do hereby absolutely and unequivocally agree to release and save harmless Baltimore County, its agents, representatives, employees and/or their heirs or assigns from any and all claims, demands, damages, actions, causes or actions, suits or liabilities, of any kind or nature whatsoever, and particularly on account of all injuries, known and unknown, both to person and property, which may have resulted or may in the future develop from or arise out of any injury, disability, loss, destruction, or mishap connected with said participation in the aforementioned program.

I further agree to save harmless and indemnify, Baltimore County, the Chief of the Baltimore County Police Department, and their agents, representatives, employees, and/or their heirs, or assigns for any and all destruction, loss, disability, or injury caused to Baltimore County property or of personnel emanating from my participation or my child's participation in the aforementioned program.

I am aware that photos may be taken of myself or my child during the Youth Leadership Academy. I am also aware that these photos are the sole property of the Baltimore County Police Department. I hereby give the Baltimore County Police Department the rights to use these photographs in future recruitment publications as well as press releases.

Finally, I have reviewed the above waiver and release of responsibility and fully understand the terms and conditions contained herein. Therefore, I voluntarily execute this agreement for the purpose stated.

The terms hereof shall be in full force and effect during the period of my participation or my child's participation in the Baltimore County Police Department's Youth Leadership Academy.

Participant's Name: _____ _____ _____
Printed ***Signature*** ***Date***

Parent's Name: _____ _____ _____
(and/or guardian) ***Printed*** ***Signature*** ***Date***