

# Crystal Lake Police Department Citizen Police Academy

## Application and Waiver of Liability

Name: \_\_\_\_\_ Sex: \_\_\_\_ Date of Birth: \_\_\_\_\_  
(Last, First, Middle Initial)

Home Address: \_\_\_\_\_

Primary Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Phone Number: \_\_\_\_\_

I, \_\_\_\_\_, hereby state that I am at least 17 years of age or older, and I'm a willing volunteer wishing to participate in the Crystal Lake Police Department's Citizen Police Academy.

I state that I understand that a portion of the Citizen Police Academy involves practical exercises. I further state that I understand that participation in said practical exercises is totally voluntary on my part and that if I chose to participate I am doing so at my own risk.

I understand and agree that as a participant in the Citizen Police Academy, I am not an employee of the Crystal Lake Police Department or the City of Crystal Lake.

I understand and agree that the Crystal Lake Police Department, or their agents, may conduct a criminal history check to determine my eligibility for entry into the Citizen Police Academy.

I understand and agree that this application in no way obligates the Crystal Lake Police Department to allow my entry into the Citizen Police Academy.

In signing this application and waiver of liability form, I hereby forever release and hold harmless the City of Crystal Lake, its officers, employees and agents from any and all liability, damages, suits, claims and demands for damages at law or in equity including, but not limited to, personal injury, death or property damage, which I now have or may have hereafter on account of or in any way related to my participation in the Crystal Lake Police Department's Citizen Police Academy.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_