



POLICE DEPARTMENT

Kenneth J. Meuler, Chief of Police

EXPLORER POST #9911

SUBJECT: PARTICIPATION WAIVER

I hereby request participation in the various functions of the West Bend Police Explorer Post #9911.

I hereby agree to hold Explorer Post #9911, the City of West Bend, the West Bend Police Department and its members, blameless for any injuries during Explorer functions. I understand and agree to assume all liability for any and all injuries I may receive.

In the event of sickness or injury involving medical treatment, I hereby authorize such medical treatment as necessary and agree to hold all parties thereto blameless.

When involved in the Ride-along Program, I agree to follow the guidelines set forth in the program.

Name of Participant (Print)

Signature of Participant

Date

Signature of Parent (If under the age of 18)

Date

State of _____

County of _____

Signed before me this _____ day _____ 20 _____

Notary Public

Commission Expires