



**RELEASE, WAIVER AND INDEMNIFICATION FORM  
SHPD SUMMER YOUTH POLICE ACADEMY  
JUNE 23-27, 2025**

Individual Participant: \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

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

Telephone No.: \_\_\_\_\_ Email Address: \_\_\_\_\_

Shirt size: \_\_\_\_\_

In consideration of the agreement by the City of Shaker Heights ("City") to permit the person named above ("Participant") to participate in the Youth Police Academy (the "Academy"), on the dates stated above, which will involve youths between the ages of 14 and 18 years of age, and will include classes, lectures, some physical activity, role-playing, demonstrations, and possibly a field trip on the last day, with lunch provided, the Participant and the above-named Parent or Guardian agree as follows:

- (1) The Participant is given permission by the Parent or Guardian signing below to participate in the Academy.
- (2) The undersigned Participant and the Parent or Guardian of the Participant, for themselves and for their agents, heirs, executors, administrators, successors and assigns, agree to waive any rights to, and protect, indemnify and save the City harmless from, all suits, claims, demands, actions, damages, losses, causes of action, costs and expenses of any nature, and all known and unknown, foreseen and unforeseen consequences related thereto, resulting from injuries or damages to persons or property occurring at the Academy, during or arising out of the Participant's attendance and/or participation in the Academy .
- (3) The undersigned Participant and the Parent or Guardian of the Participant hereby acknowledge that they have read and understand the foregoing release, and they are aware of the risks of attendance at or participation in the Academy.

**Participant's signature.** The undersigned Participant named above has indicated their understanding and agreement with the terms herein.

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

Printed Name: \_\_\_\_\_

**Parent or Guardian of Participant:** The undersigned Parent or Guardian named above has indicated their agreement with the terms herein.

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

Printed Name: \_\_\_\_\_