WAIVER OF LIABILITY AGREEMENT FOR THE ORANGE COUNTY SHERIFF’S DEPARTMENT TEEN ACADEMY
(to be signed by the Participant if 18 years of age or older)

I, ___________________________, am 18 years of age or older, and I have

(Print Name)

voluntarily requested permission from the Orange County Sheriff’s Department (“Sheriff’s Department”) to participate in the Sheriff’s Department’s Teen Academy and to accompany Sheriff’s Department members during the performance of their duties. In consideration for the Sheriff’s Department allowing me to participate in the Teen Academy, I hereby understand and agree to the following:

1. I am aware the work of the Sheriff’s Department is inherently dangerous, and that I may be subjected to the risk of personal injury, death and/or damage to my property by accompanying a member or members of the Sheriff’s Department during the performance of their duties. I hereby freely, voluntarily and with such knowledge assume the risk of personal injury, death, or damage to my property while as a passenger in a vehicle or vessel assigned to the Sheriff’s Department and/or while accompanying a member or members of the Sheriff’s Department during the performance of their duties, unless such injury, death and/or damage is caused by the willful misconduct of a Sheriff’s Department employee.

2. I will not hold the County of Orange, the Orange County Sheriff-Coroner, the Orange County Sheriff’s Department and its employees and their sureties responsible or liable for any injury, death and/or damage to me or my property while riding in any vehicle or vessel assigned to the Sheriff’s Department and/or while accompanying a member or members of the Sheriff’s Department during the performance of their duties, unless such injury, death and/or damage is caused by the willful misconduct of a Sheriff’s Department employee.

3. For myself, my heirs, executors and assigns, I agree to defend and indemnify the County of Orange, the Orange County Sheriff-Coroner, the Orange County Sheriff’s Department and its employees and their sureties against any and all manner of actions, causes of actions, suits, debts, claims, demands, or damages or liability or expense of every kind and nature incurred or arising by reason of any actual or claimed negligent or wrongful act of mine while riding in any vehicle or vessel assigned to the Sheriff’s Department, and/or while accompanying any member or members of the Sheriff’s Department during the performance of their duties.

4. It is my express intent that this agreement shall bind my heirs, assigns, executors, administrators and/or any other personal representative and members of my family.
I hereby represent that I have carefully read and understand the contents of this agreement and have signed this agreement on my own free will.

Participant’s Signature:_______________________________________ Date:______________
(If 18 years of age or older)

**Consent for Medical Aid in Case of an Emergency**

In case of an emergency, while I am a participant in the Orange County Sheriff’s Department’s Teen Academy, I give permission to any Sheriff’s employee to seek necessary medical aid or hospitalization for me until such time as the below designated person can be contacted.

Participant’s Signature:_______________________________________ Date:______________
(If 18 years of age or older)

Person to be Contacted:__________________________________________
(Print Name and Relationship to You)

Contact Information: ____________________________________________
(Address and Phone Number(s))
FOR STUDENTS WHO ARE 18 YEARS OF AGE OR OLDER:

I, _____________________________________________, hereby consent to be photographed and/or

[Print Your Name]

recorded and consent that photographs and/or recordings of myself and my voice may be used by the County of Orange and the Orange County Sheriff’s Department (“Sheriff’s Department”) in all forms of media for educational, public relations and community outreach for the Sheriff’s Department. This consent includes video or still photography, in digital or other format, and any other means of recording or reproducing my image and voice.

I understand that the use of my photograph(s) and/or recording may include publication in print, video, and on the Sheriff’s Department website.

I understand that there will be no financial compensation for my consent to be photographed and/or recorded and for publication of my photograph(s) and/or recordings. I agree to release the County of Orange and the Sheriff’s Department and their agents, officers, and employees from all claims, demands, and liabilities whatsoever in connection with the above.

I have read and understood this consent and release, and I voluntarily agree to its terms.

____________________________  ________________________
Participant/ (please print)  Signature

____________________________  ________________________
Address (please print)  City, State, Zip

____________________________  ________________________
Telephone  Date