

## VANCOUVER POLICE DEPARTMENT

## RELEASE OF LIABILITY AND WAIVER OF CLAIMS FOR YOUTH (UNDER 19 YEARS OF AGE)

## \*\*PLEASE READ CAREFULLY\*\*

WE WISH YOUR CHILD'S PARTICIPATION IN THIS "TAKE YOUR KIDS TO WORK DAY"
TO BE A SAFE AND ENJOYABLE EXPERIENCE, BUT ANY SUCH ACTIVITY DOES
INVOLVE RISK. THIS AGREEMENT MUST BE COMPLETED, SIGNED BY A PARENT OR
GUARDIAN AND DATED, AND SIGNED BY A VPD POLICE OFFICER **PRIOR TO**PARTICIPATION.

**ASSUMPTION OF RISKS:** I, the undersigned parent/guardian, am aware of my child's participation in the Vancouver Police Department's ("VPD") Take your kids to work workshop (the "Workshop") and voluntarily assume:

- a) all risks and dangers arising from my child's participation in the Workshop including personal safety training and other Workshop risks not identified beforehand; and
- b) the possibility of injury, death, property damage or loss, resulting from my child's or others' participation in the Workshop.

**RELEASE OF LIABILITY, WAIVER AND INDEMNITY:** In consideration of the VPD accepting my child as a participant in the Workshop, I agree:

- 1. **TO WAIVE ANY AND ALL CLAIMS** that I or my child have or may have in the future against the City of Vancouver, the VPD, and the Vancouver Police Board and their respective officials, officers, employees, trainers and representatives (collectively, the "VPD Releasees") in connection with my child's participation in the Workshop;
- 2. **TO RELEASE** the VPD Releasees from any and all liability for any loss, damage, expense, injury, or death that I or my child may suffer, incur or experience in connection with my child's participation in the Workshop, including if such loss, damage, expense, injury, or death is a result of the negligence of any VPD Releasee; and
- 3. **TO HOLD HARMLESS AND INDEMNIFY** the VPD Releasees from any and all claims, demands, actions, expenses, and liabilities for causing any damage to the property of, or personal injury to, or death of any third party in connection with my child's participation in the Workshop.

Participant Name	Parent/Guardian Signature	Date Signed	
VPD Officer Name	VPD Officer Signature	Date Signed	