## CLATSOP COUNTY CITIZEN POLICE ACADEMY APPLICATION FOR ADMISSION & WAIVER

Name:			
Last	First	Middle	Maiden/other
Date of Birth:	Sex:	_	
Social Security Number:			
Address:			
Home/Cell Phone:		_	
Work Phone:			
Email Address:			
Driver's License Number:		State:	
Occupation:	Employer:		
Emergency Contact Name:		Phone:	
How did you hear about the Citi	·		
What do you expect to gain from	attending this Academy?		
What experience have you had w	vith police? Do you consider	these experiences to	be positive or negative?

## RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT FOR CLATSOP COUNTY CITIZEN POLICE ACADEMY

The undersigned, in consideration for the privilege of being a participant in the Citizen Police Academy of the Cities of Seaside, Gearhart, Cannon Beach, Warrenton, Astoria, County of Clatsop, and the Oregon State Police and recognizing that such activity involves certain inherent risks and dangers, does hereby agree to assume the risks attendant to all activities associated with participation in the Citizen Police Academy of the Cities of Seaside, Gearhart, Cannon Beach, Warrenton, Astoria, County of Clatsop, and the Oregon State Police.

The undersigned for him/herself, legal representatives, heirs and assigns does hereby release, waive and discharge the Cities of Seaside, Gearhart, Cannon Beach, Warrenton, Astoria, County of Clatsop, and the Oregon State Police, its officers, agents and employees for any liability for any loss or damage or any claim or damages resulting from my participation in the Citizen Police Academy of the Cities of Seaside, Gearhart, Cannon Beach, Warrenton, Astoria, County of Clatsop, and the Oregon State Police on account of any injury to me or my property, whether caused by negligence of the Cities of Seaside, Gearhart, Cannon Beach, Warrenton, Astoria, County of Clatsop, and the Oregon State Police its officers, agents and employees, or otherwise, while participating in the Citizen Police Academy of the Cities of Seaside, Gearhart, Cannon Beach, Warrenton, Astoria, County of Clatsop, and the Oregon State Police.

The undersigned hereby agrees to indemnify, defend and hold harmless the Cities of Seaside, Gearhart, Cannon Beach, Warrenton, Astoria and County of Clatsop, its officers, agents and employees from any and all claims, losses, damages, causes of action, and liability, including all expense of litigation for injury to any person or loss of property arising out of my participation in the Citizen Police Academy of the Cities of Seaside, Gearhart, Cannon Beach, Warrenton, Astoria, County of Clatsop, and the Oregon State Police.

Dated this	day of	, 20
Sig	gnature	
Pr	rint Name	

## **AUTHORITY TO CONDUCT BACKGROUND INVESTIGATION**

As an applicant to participate in the Clatsop County Citizen Police Academy, I hereby authorize the City of Cannon Beach Police Department to conduct a criminal history background investigation. I understand that such background investigation is being conducted due to the content of the classes given at the Academy.

Print Name