



CITY OF  
**Sterling  
Heights**

### **Participant and Waiver of Liability Agreement**

The City of Sterling Heights Police Department has developed a program intended to give interested participants practical contact with the Sterling Heights Police Department and the law enforcement profession.

By the very nature of participation, there are risks involved and the participant will be exposed to the same type of risks as a police officer. The participant may, without advance warning, find him or herself in situation that are potentially hazardous during the observation of police department personnel, use or demonstration of police department equipment, and riding along in police department vehicles. Possible injuries to the participant could be very minor or could include serious mental and/or physical injuries, including death. The participant assumes all risks of illness and injury during participation.

**In consideration of being allowed to participate I agree: (A) to assume risks of injury and property damage and accept all responsibility in case of accident, injury or death; (B) to release the City of Sterling Heights, the Sterling Heights Police Department, and all officials, employees, and volunteers from any and all liability arising from participation; (C) not to sue the City of Sterling Heights, the City of Sterling Heights Police Department, their officials, employees and volunteers for any claim damages, or costs which I may have as a result of any accident, injury or death incurred or suffered by me during participation; (D) that this agreement shall be binding upon my heirs, personal representatives, successors and assigns.**

I further agree to observe and obey the regulation, policies, and directions, oral or written, of the Sterling Heights Police Department or other emergency personnel. The Sterling Heights Police Department may at any time terminate my participation in this program for any reason, without prior notice or cause. During my participation, I will not be considered in any way an employee or volunteer of the Sterling Heights Police Department or the City of Sterling Heights.

I acknowledge receipt and review of this agreement and agree to abide by its terms and conditions.

**Witness:**

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Date Signed: \_\_\_\_\_

**Participant:**

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

Print Name: \_\_\_\_\_

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

Phone No: \_\_\_\_\_

Participant Date of Birth: \_\_\_\_\_