



# City of Creedmoor

## CREEDMOOR POLICE DEPARTMENT

111 MASONIC STREET | PO BOX 765 | CREEDMOOR, NORTH CAROLINA 27522

EMERGENCY DIAL 911 | PHONE (919) 528-1515 | FAX (919) 528-6320



### PARENTAL CONSENT FORM SHOP WITH A COP PROGRAM

**NATURE OF ACTIVITY:** Shop With A Cop

**DESTINATION:** Wal-Mart

**DATE OF TRIP:** \_\_\_\_\_

**FORM OF TRANSPORTATION:** Activity Bus/Van

**NAME OF SUPERVISOR(S):** Lt. \_\_\_\_\_  
Sgt. \_\_\_\_\_

**NAME(S) OF STUDENT(S):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, as a parent/guardian, choose for my minor child(ren) listed above to participate in the *Shop With A Cop* program and hereby assume all risks and hazards incidental to the conduct of the activities on behalf of myself as well as on behalf of my minor children and ensure that I will faithfully comply with the terms of this registration and any Creedmoor program or facility policies and procedures. The Creedmoor Police Department assumes no liability for injury or damages arising from participation in the program. I release, absolve, and indemnify the City of Creedmoor, officials and employees of the City, volunteers, contractors, agents, vendors, and sponsors from all risks and hazards associated with the program. In the event of injury, I expressly waive all claims against the City of Creedmoor. I understand that insurance coverage is not provided by the City of Creedmoor, the Creedmoor Police Department, nor any of its agents. I understand transportation of my child will occur by means of a third party owned vehicle and that vehicle's owner's liability coverage is applicable to any vehicular accident and/or injury. Further, I give permission for emergency care to be rendered to my child(ren) should I not be able to give such permission. I understand that neither the supervisor nor any staff are responsible for my child(ren) prior to or after the scheduled program hours.

I understand that the Creedmoor Police Department reserves the right to photograph participants for publicity purposes and I hereby give the right and permission to copyright and use, publish, reuse, or republish pictures of my child(ren).

**I have read the above statements regarding the City of Creedmoor's Shop with a Cop program. I understand that any accident/incident related expenses other than as covered above would be my responsibility. I consent to my child's participation in this activity.**

\_\_\_\_\_  
Parent or Guardian Printed Name/Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Printed Name/Signature

\_\_\_\_\_  
Date

*TO PROTECT AND SERVE*