**LIABILITY RELEASE AND MEDICAL AUTHORIZATION**

As parent or guardian of the child named below, I give my permission for my child (age 12-18 on date) to participate in the (department/program name) Junior Firefighter Program. I give permission for representatives of the (department/program name) to provide transportation to my child for emergency reasons. In the event of an emergency, I authorize the administration of basic first aid. I also authorize appropriate treatment by emergency medical personnel.

By signing this release, I agree that if my child is injured in any way while participating in the program, I voluntarily release the (department/program name), as well as all of their personnel, staff, Board, and directors, from any and all liability for the injuries. I understand and agree that this release applies to not only me, but also my estate, heirs, and assigns.

In the event some other person or entity seeks compensation for these released liabilities, my estate or I, will indemnify and hold harmless the (department/program name).

I understand that the program will include minimal risk hands-on trainings with careful, trained supervision; however, unexpected events may occur. I have determined that my child is fully medically capable of participating in the program activities.

I understand that photographs and video may or may not be taken of my child during these activities. I give my permission for the (department/program name) to use photographs or video for promotional, including brochures or promotional video, and training purposes.

I have read this release; I understand it; and I fully agree to all its terms.

Signature of parent/guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of parent or guardian (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or guardian address (if different from child): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State/ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Junior’s Name (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State/ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Junior’s signature if 18: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_