

HOLLAND/SPRINGFIELD

SAFETY TOWN

SPONSORED BY:

VILLAGE OF HOLLAND POLICE DEPARTMENT

AND

SPRINGFIELD TOWNSHIP FIRE DEPARTMENT

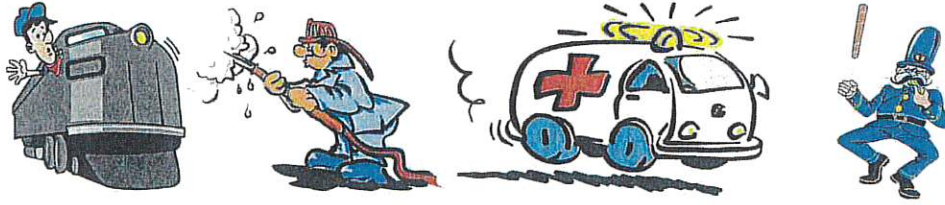


REGISTRATION PACKET

JUNE 21-JULY 2, 2021
Holloway Elementary
6611 Pilliod Road

9:00 AM –11:00 AM OR 1:00 PM -3:00 PM

Holland/Springfield Safety Town



Dear Parent(s) or Guardian;

June, 2021

During the nine days, your child will be attending the Holland/Springfield Safety Town Program our staff will be photographing and/or videotaping the activities. The children will be given identification cards while in *Safety Town*. Pictures, videos and photos, will be used for the graduation ceremony and for promoting the *Safety Town* Program.

In order for our staff to complete these projects we need the waiver form signed, witnessed and returned along with the application.

Thank You,
Safety Town Personnel
Holland/Springfield

CONSENT, RELEASE AND WAIVER
PHOTOGRAPHS AND/OR VIDEO TAPES
FOR
"Safety Town"
2021

The undersigned parents and/or guardian of _____, a minor, for and in consideration of the services provided by the Holland Police Department, or the Village of Holland, or Springfield Township Fire Department, of the Township of Springfield, in Holland, Ohio, and for other good and valuable consideration, the receipt of which is hereby acknowledged by the undersigned, do hereby consent to have the Village of Holland's Police Division and Springfield Township Fire Department photograph and/ or video tape said child, the ***photographs and/or video tapes will be used for the "Safety Town Program" graduation ceremony and for promotional purposes for the "Safety Town Program"*** and do hereby waive, release, and forever discharge the Village of Holland and the Township of Springfield, in Holland, Ohio, their agents, successors, and assigns from any and all claims and causes of action of any kind or nature which the undersigned may have, or in the future can, shall, or may have on account of any and all damages, losses, or injuries to persons or property, or both, known and unknown, resulting or to result from photographing and/ or video taping of said child.

It is hereby acknowledged that the photographs and/ or videotapes of said child is being done at the voluntary request of said child and the undersigned.

The undersigned hereby declare that the terms of this consent, release and waiver have been completely read and are fully understood and voluntarily accepted for the purpose of aforesaid and for the express purpose of precluding forever any further or additional claims arising out of aforesaid photographs and/ or video tapes.

Signature of Parent or Guardian

Date

Signature of Witness

Date