## ARLINGTON POLICE DEPARTMENT CITIZEN POLICE ACADEMY APPLICATION AND WAIVER

Full Name						Application Date			
Home Address						Zip Code			
Home Telephone		Business Telephone		Occupation	on				
Employer		Employer Address			Zip Code				
Date of Birth Driver's Licen		se Number and State   Social Security		Number		Race	Sex		
How did you hear about t	he Citizen Police	Academy?	L						
Other organizations you a	are involved with:								
Have you ever been arrested or convicted of any crime?   Yes No If "Yes," please explain.									
in the foregoing statements on this dismissal from the	tatements and application she Arlington Ci and that the Arstigation that	no willful misrepres answers. I unders hall be sufficient ca tizen Police Acade d'lington Police Dep may include, but hal references."	tand that any ause for reject emy. partment will	omission ion for e	or false inrollment	in or orough			
Applicant's Signature			Date Signed						

Return completed application and waiver to:

Arlington Police Department c/o Officer Doug Glotfelty 2060 W. Green Oaks Blvd. Arlington TX 76013

Our office will contact you by telephone upon receipt.

## THE STATE OF TEXAS

COUNTY OF TARRANT

## WAIVER OF LIABILITY, RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

KNOW ALL MEN BY THESE PRESENTS:

THAT I, the undersigned	agton property, equipment and services, including defense, and recognizing that such activity by and person, to include property damage and/or dant to all activities associated with participation including but not limited to: property damage accidents or motor vehicle collisions on either or personal injury to me as a result of the acts of my activities including firing range activities and all injury to City of Arlington property or employees my activities; property damage and/or personal intercaused by errors, omissions or negligent acts of onal injury to me resulting from my own errors,					
I hereby waive all claims, release, indemnify, defend and hold harmless the City of Arlington and all of its officials, officers, agents, and employees in both their public and private capacities, from any and all liability, claims, suits, demands, expenses of litigation, or causes of action which may arise by reason of injury to persons or loss of, damage to or loss of use of any property occasioned by error, omission, or negligent act of myself or any other persons with regard to this Agreement and I will at my own cost and expense defend and protect the City of Arlington against any and all such claims and demands.						
I hereby agree to indemnify, defend and hold harmless the City of Arlington and all of its officials, officers, agents, and employees from and against any and all claims, losses, damages, causes of action, suits, and liability of every kind, including all expenses of litigation, including but not limited to court costs and attorney's fees for death, injury to or debt of any person or loss of, damage to, or loss of use of any property arising out of or in connection with this Agreement. Such indemnity shall apply whether the claims, losses, damages, causes of action, suits, of liability arise in whole or in part from the negligence of the City of Arlington, its officers, officials, agents or employees. It is the express intention of the parties hereto, both myself and the City of Arlington, that the indemnity provided for in this paragraph is indemnity by the undersigned to indemnify and protect the City of Arlington's own negligence, whether that negligence is the sole or concurring cause of the injury, death or damage.						
It is further agreed that the execution of this "WHOID Harmless Agreement" will not constitute a waiver be governmental immunity where applicable, or any other decreas.	by the City of Arlington of the defense of					
Signed, this theday of	, 201					
Signature:						
Address:						
Telephone:						