



# Pittsfield Township Department of Public Safety Citizens' Public Safety Academy 2012

## Application

Applications can be dropped off in person, faxed to: 734-944-0744 or mailed to 6227 W. Michigan Avenue, Ann Arbor, MI 48108

Name (First, Last)

Date of Birth\*

Address (Including Apt/Suite #)

City

State

Zip Code

Phone Number

Alt. Phone Number

Email Address

Drivers License Number\*

\*A background check is required.

I am 18 years of age or older.

I am a Pittsfield Charter Township resident.

## Waiver of Liability

In consideration of the benefits that I will receive from my participation in the Pittsfield Charter Township Citizens' Public Safety Academy, sponsored by Pittsfield Charter Township, I release all Firefighters, Police Officers, Public Officials, agents, servants, employees and volunteers from any and all liability, claims, demands, actions and causes of action which I may hereafter have on account of any and all injuries and damage to me or my property, or my death, arising out of or related to any happening or occurrence while I am participating in the Citizens' Public Safety Academy. For the same consideration, I agree to forever hold Pittsfield Charter Township and said persons harmless from any liability, claim, demands, actions or cause of action.

In signing this waiver, I acknowledge that I have reviewed the overview of activities included in the Pittsfield Charter Township Citizens' Academy Application and recognize the risks those activities entail. I acknowledge that I am a willing volunteer, 18 or older, and not an employee of the Pittsfield Charter Township Public Safety Department, and therefore not entitled to compensation or benefits. I also acknowledge that my participation in this academy will not certify me as a Firefighter, Police Officer nor as a Provider of Emergency Medical Care except for certification in the American Heart Association™

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

Internal Use Only

Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_