

Euclid Police Department Junior Police Academy



Sponsored by Euclid PAL

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|---|--|---|---|--|--|--|
| Child's First Name | | Child's Last Name | | | Date of Birth | |
| | | | Ι | | | |
| Child's Address | Apt. | Zip | Home Phone | | Cell Phone | |
| | | | | | | |
| Child's Sex | | | Tee-Shirt Size (ADULT SIZE) | | | |
| M F | | | S | M | L XL | |
| Applications will be accepted at submitted NO LA | | _ | • | | | |
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| Parent/Guardian Name | | | Apt. | Zip | | |
| | | | | | | |
| Home Phone Number | | | Cell Number | | | |
| | | | | | | |
| Emergency Contact Name (Adult) | Address & City | | | Phone Number | | |
| | | | | | | |
| Activity Disclaimer/Photo Waiver In consideration of my child's participation in Eurelinquish any and all claims, demands, and/or of City of Euclid, its employees, or a Euclid PAL age permission to the Euclid Police Activities League ads for the purpose of marketing, publicity, and/authorizes the Euclid Police Department/Euclid guarantee treatment upon arrival at the designa procedures. Parent/Guardian PRINTED NAME Parent/Guardian SIGNATURE: | aclid Police Activities auses of action what and or volunteer to use the above N for recruiting (mem PAL to secure emerged source of emerged). | atsoever. This (s) while at an ame(s) and an bers, volunte gency transpiency service, | s includes any lega ny PAL activity or ny photos of my ch ers, and supporter ortation for your o as each facility ha | Il fees and/or while in tran nild for the us rs) for Euclid child if neede s its own trea | related costs against the sport. I hereby give my se in print, radio, and media PAL. This application also d. This does not authorize or atment policies and | |