



**Dawson County Emergency Services  
2017 Junior Fire Academy Application**

Cadet's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Cadet's School: \_\_\_\_\_ Male/Female(circle) T-Shirt Size: \_\_\_\_\_ (Youth/Adult)

Home Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Name	Telephone	Cell Phone
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**ONLY** the following people may pick my child up from the Junior Fire Academy:

\_\_\_\_\_

Please list all health concerns, allergies, limitations or restrictions, and medications for your child:

\_\_\_\_\_

\_\_\_\_\_

**MINOR CHILD RELEASE, LIABILITY WAIVER AND HOLD HARMLESS STATEMENT FOR PARTICIPATION IN THE JUNIOR FIRE ACADEMY PROGRAM SPONSORED BY DAWSONCOUNTY**

I understand that there are certain risks involved with participating in the activity identified above. On behalf of my minor child identified above, I hereby RELEASE, DISCHARGE AND AGREE TO HOLD HARMLESS DAWSON COUNTY, ITS OFFICERS, AGENTS, VOLUNTEERS, ASSISTANTS, AND EMPLOYEES, from any and every claim, demand or action of any kind arising due to bodily injury, illness, death, and/or property damage resulting from any incident which may occur to my minor child as a result of my minor child's participation in the County's activities. This RELEASE, LIABILITY, WAIVER AND HOLD HARMLESS STATEMENT does not apply if such injury, death or damage is caused by the willful, reckless or gross negligence of Dawson County, its officers, agents, volunteers, assistants or employees.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Parent or Guardian

\_\_\_\_\_  
Printed Name of Minor Child