

S.T.A.R.T.
Safe Teen Accident Reduction Training

Waiver of Liability/Parental Permission

I understand the Tucson Police Department/Central Safety Services/Tucson Police Foundation Teen Driving Program is a voluntary opportunity to participate in a hands on, skills based, behind the wheel driver training course. This training is designed to teach accident avoidance skills to young drivers. As with any dynamic training, there is an element of risk involved. Knowing this, I agree to and acknowledge the following.

I further understand that this training involves various techniques used by drivers to avoid accidents in critical driving situations. The vehicles used for this training have undergone a thorough safety inspection and are capable of handling this type of training. Should an unforeseen incident with a vehicle or an unanticipated action by a student occur, there is a potential for harm. Potential harm could include significant injury or death. I am fully aware of the potential risks associated with my voluntary participation in this course.

Knowing the potential risks involved, I voluntarily choose to participate and assume the risk of injury or harm that may result from my participation. I agree to release and hold harmless the City of Tucson, including the Tucson Police Department and Central Safety Services, its officers, employees or volunteers, and the Tucson Police Foundation, its directors, employees or volunteers from any claims, liabilities or demands arising out of participation in this training.

In case of sudden illness or injury, I hereby give my permission to the Tucson Police Department to take appropriate action in seeking medical attention.

I have read and understand this waiver of liability.

Participant Signature: _____

Print Name: _____ Date: _____

If the participant is under 18, the following must be completed prior to participation:

I have read the above information, and agree to the terms of the above agreement, and consent to the minor's participation and medical treatment.

Parent/Guardian Signature: _____

Print Name: _____ Date: _____

Address: _____

Emergency Phone Number: _____