

**HOLLAND/SPRINGFIELD**

# **SAFETY TOWN**

SPONSORED BY:

VILLAGE OF HOLLAND POLICE DEPARTMENT

AND

SPRINGFIELD TOWNSHIP FIRE DEPARTMENT



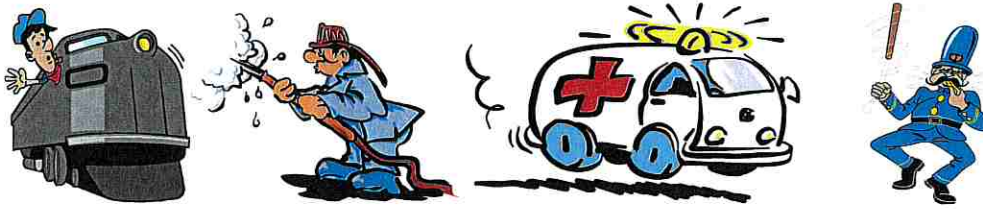
## **REGISTRATION PACKET**

**JUNE 13-24, 2022**  
**Holloway Elementary**  
**6611 Pilliod Rd., Holland, OH 43528**

**9:00 AM –11:00 AM OR 1:00 PM -3:00 PM**



## Holland/Springfield Safety Town



Dear Parent(s) or Guardian;

June, 2022

During the nine days, your child will be attending the Holland/Springfield Safety Town Program our staff will be photographing and/or videotaping the activities. The children will be given identification cards while in *Safety Town*. Pictures, videos and photos, will be used for the graduation ceremony and for promoting the *Safety Town* Program.

In order for our staff to complete these projects we need the waiver form signed, witnessed and returned along with the application.

Thank You,  
*Safety Town* Personnel  
Holland/Springfield

**CONSENT, RELEASE AND WAIVER**  
**PHOTOGRAPHS AND/OR VIDEO TAPES**  
**FOR**  
***"Safety Town"***  
**2022**

The undersigned parents and/or guardian of \_\_\_\_\_, a minor, for and in consideration of the services provided by the Holland Police Department, or the Village of Holland, or Springfield Township Fire Department, of the Township of Springfield, in Holland, Ohio, and for other good and valuable consideration, the receipt of which is hereby acknowledge by the undersigned, do hereby consent to have the Village of Holland's Police Division and Springfield Township Fire Department photograph and/ or video tape said child, the ***photographs and/or video tapes will be used for the "Safety Town Program" graduation ceremony and for promotional purposes for the "Safety Town Program"*** and do hereby waive, release, and forever discharge the Village of Holland and the Township of Springfield, in Holland, Ohio, their agents, successors, and assigns from any and all claims and causes of action of any kind or nature which the undersigned may have, or in the future can, shall, or may have on account of any and all damages, losses, or injuries to persons or property, or both, known and unknown, resulting or to result from photographing and/ or video taping of said child.

It is hereby acknowledged that the photographs and/ or videotapes of said child is being done at the voluntary request of said child and the undersigned.

The undersigned hereby declare that the terms of this consent, release and waiver have been completely read and are fully understood and voluntarily accepted for the purpose of aforesaid and for the express purpose of precluding forever any further or additional claims arising out of aforesaid photographs and/ or video tapes.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date