

PARENTAL CONSENT FORM  
LINCOLN COUNTY PATROL

I understand that \_\_\_\_\_ is under 18 years of age and consents to accompany officers of the Lincoln County Sheriff's Office in performance of their duties, to render assistance to them and to observe first hand, the activities of a law enforcement agency.

I do hereby expressly waive any and all claims against the Lincoln County Sheriff's Office or any employee thereof for liability arising out of any incident occurring during these activities.

I do further agree to save and keep the Lincoln County Sheriff, his sureties, all members of the Sheriff's Office, their sureties and each of them, free and indemnified, and harmless from any loss, damage liability or expense inferred or claimed by any one reason of any damage or injury to above juvenile or his/her property resulting from any of the aforesaid facts.

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE