



JUNIOR POLICE ACADEMY
City of Middletown Police Department
(845) 343- 3151

The undersigned parent/guardian, understanding all activities and requirements, requests the opportunity and privilege of having my child participate in the City of Middletown Police Department Junior Police Academy. The undersigned agrees to have their child obey any and all directives or orders of any member of the City of Middletown. While he/she is engaged in any and all activities relating to the Junior Police Academy.

I further acknowledge that the privilege of participating in this program may be rescinded at any time during the course of the Junior Police Academy as a result of improper behavior or other factors that may be detrimental to the safety or well-being of any other participants or instructors, and the decision to rescind this privilege is in the sole and absolute discretion of the police officers involved. Furthermore I have received and reviewed the Code of Conduct page of this application with my child and agree to abide by those instructions and rules.

The undersigned understands that the Junior Police Academy generates interest from news media, both print, Internet and television, and authorizes the release of my child's image for use in any news or media story relating to the Junior Police Academy. I also authorize the release of my child's image and/or name for use in any and all presentations or other media to be used for or by the City of Middletown.

Parent/Guardian: _____

Signature: _____ Date: _____