

**MEADE COUNTY**  
**Vehicle Waiver of Liability**

I, \_\_\_\_\_, request permission to ride with Meade County personnel and observe the operation and functions of Meade County.

I acknowledge that if permissions are granted for me to accompany Meade County personnel, I may be placing myself in a position to encounter dangerous and/or life-threatening situations.

I further acknowledge that while in the accompaniment of Meade County personnel, they may acquire certain information that is confidential or information that is not to be released pursuant to Meade County policy. I agree to keep all information acquired while in the accompaniment of Meade County personnel confidential, and I will not release said information.

I, by signing this WAIVER, agree to abide by all directives given to me by Meade County personnel or any other cooperating agency. I will at all times follow all instructions and directions given to me, and I will not interfere in the performance of any duties of Meade County personnel.

I, by signing this WAIVER, waive any claim that I may have against Meade County and Meade County personnel, whether as an individual or as an employee. I further agree to hold Meade County harmless from any and all claims or damages that may arise by granting me this request to accompany Meade County personnel.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2019

Signature of Passenger: \_\_\_\_\_

Signature of Parent or Legal Guardian: \_\_\_\_\_

Approved by: \_\_\_\_\_