



NERLEEA
P.O. Box 199
Niantic, CT 06357



2014 Youth (Under Age 18) Application for Membership

*Date: _____

*Department: _____

*Name: _____

*Address: _____

*City: _____ *State: _____ *Zip: _____

*Phone #: _____ Circle one: Home / Cell *Date of Birth: _____ *Age: _____

*Email: _____ (for online registration purposes)

NOTE: There is a \$5.00 per year membership fee that needs to be paid by either you or your post. ALL memberships expire on December 31st of each year regardless of when you joined throughout the year. Please check with your advisor to determine if you need to make a payment to the association. Advisors will be notified of lapsing membership prior to such lapse.

***ALL information is required for insurance reasons and failure to provide all information requested will result in non-registration with NERLEEA and also failure to cover the individual named above under any and all insurance policies which would cover Active Registered members. I understand that this form must be filled out legibly so that information can be easily read in the event that it is needed for insurance or other reasons.**

PLEASE PRINT NEATLY OR FORM WILL BE RETURNED AND YOU WILL BE UNREGISTERED WITH NERLEEA AND MAY NOT PARTICIPATE IN NERLEEA SPONSORED EVENTS.

HOLD HARMLESS AGREEMENT

I _____ hereby agrees to release, indemnify and hold harmless the Northeast Regional Law Enforcement Educational Association, Inc. (NERLEEA), its officers and directors, the Cadet Police Academy Executive staff and all other agents, locations and vendors contracted both public and private along with their employees and staff including but not limited to the CT National Guard, Department of the Army, Camp Niantic in Niantic, CT, the Federal Government, State employees, the University of Hartford and its employees and agents, the City of Hartford and its employees including the Hartford CT Police Department and their Police Range located at 50 Jennings Rd in Hartford, CT, all other volunteer staff both sworn and civilian, including instructors from Federal, State and Local Law Enforcement agencies, from and against all claims, suits, proceedings, actions, cause of actions, responsibility, liability demands, judgments and executions, which arise from or are in connection with events and programs sponsored by NERLEEA and its registered units. **This hold harmless remains in effect for my son/daughter until withdrawn in writing by myself or until they become inactive for one year or until they become 18 years old. Photocopies of this hold harmless are to be considered as valid as the original form & signature.** I understand that if changes are made to the hold harmless agreement that I will then be required to fill out an updated registration form.

Our agents shall give written notice to NERLEEA of any act or occurrence involving any claim, demand, or item of cost of, indemnified against herein, within ten (10) days of knowledge of such occurrence or act. A lapse in notification by our agents and/or their agents shall not abrogate the obligations of NERLEEA as agreed to herein.

I _____ give permission for my son/daughter to participate in functions sponsored by NERLEEA and its registered units and understand that there are inherent risks associated and involved in the training programs being conducted. I understand that any and all precautions will be taken to help ensure my child's safety but that the training is such that not every event may be planned for or prevented. I agree to all stipulations stated in BOTH paragraphs above and hereby give permission for _____ to participate. I do not know of any reason, medical or otherwise which would prevent my child from participating fully and safely. I also give permission for my child to be treated by either medical personnel on scene or at a hospital shall the need arise. I understand that all efforts to contact me will be made.

 Name

 Relationship (Mother / Father / Legal Guardian etc.)

 Signature

 Date

 Emergency Contact Phone # of authorizing person

Office use only ____ \$5.00 Membership paid Cash / Check # _____