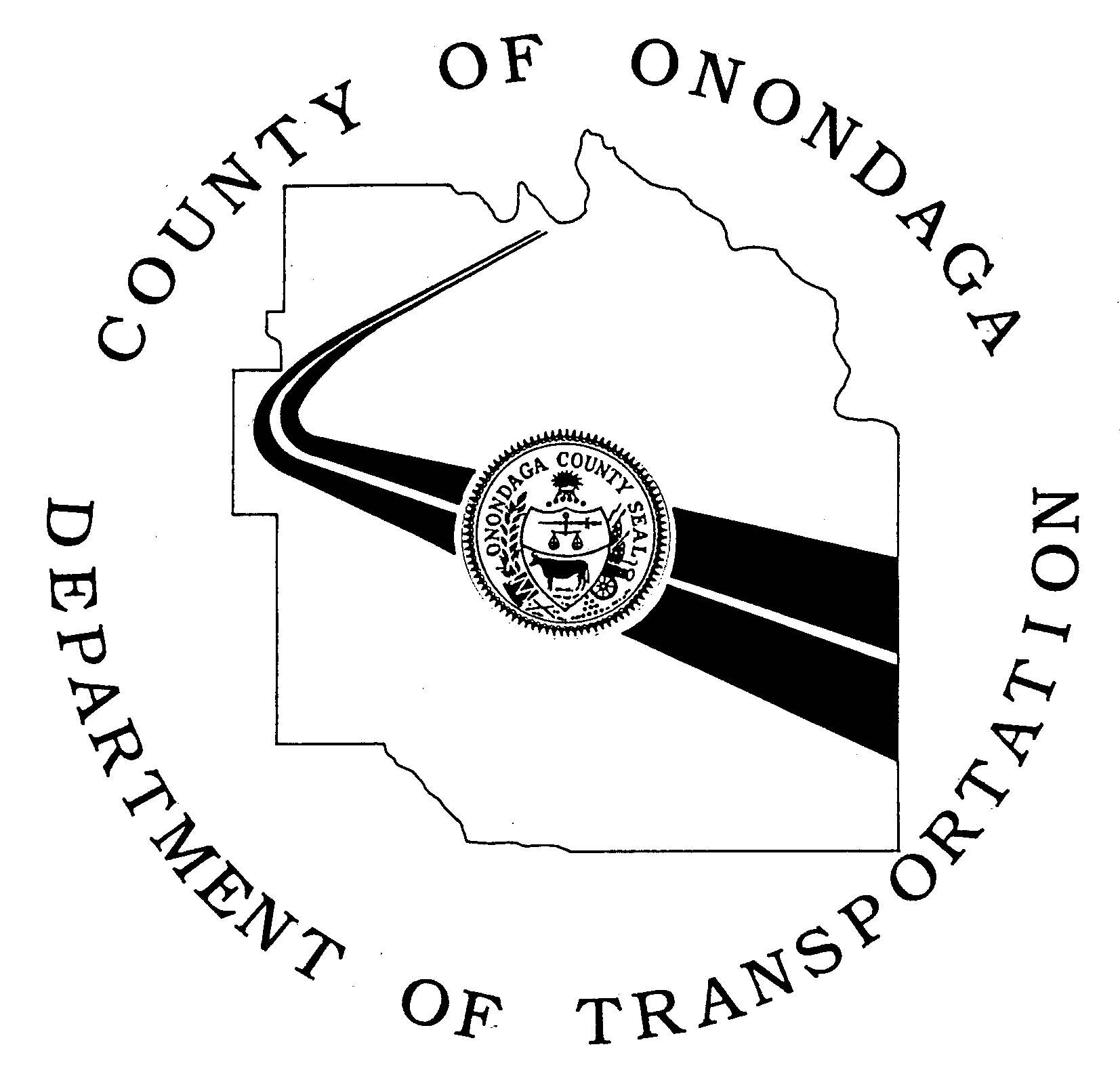
COUNTY OF ONONDAGA



DEPARTMENT OF TRANSPORTATION

J. RYAN McMAHON II JOHN H. MULROY CIVIC CENTER MARTIN E. VOSS

County Executive 421 MONTGOMERY STREET, 11TH FLOOR Commissioner

SYRACUSE, NEW YORK 13202

Phone: 315.435.3205 Fax: 315.435.5744

ongov.net

**ADOPT-A-HIGHWAY PROGRAM RELEASE FORM**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, am a voluntary member of the

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Group and, as such, have attended the roadside safety training program as a prerequisite to participation in the Onondaga County Adopt-A-Highway Program, and have reviewed the Onondaga County Adopt-A-Highway Program Guidelines.

I do herby release and discharge Onondaga County and its officers, agents and employees, from all claims, demands and causes of action of every kind whatsoever for any damages and, or, injuries which may result from my participation in the Onondaga County Adopt-A-Highway Program, and other voluntary activities on or near the roadway rights-of-way.

I further agree to hold harmless Onondaga County and its officers, agents and employees, from all claims, demands and causes of action of every kind whatsoever for any damages and, or, injuries which may result from my participation in the Onondaga County Adopt-A-Highway Program, and other voluntary activities on or near the roadway rights-of-way.

Participants Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the participant is a minor, a parent or guardian must sign below.

Parent/Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Return the signed Release Form to:

Patty Jeschke  
Project Coordinator  
Onondaga County Department of Transportation

421 Montgomery Street – 11th Floor

Syracuse, NY 13202

REVISED 02/13/2019