



Sheriff **Larry Campbell**

**Leon County Sheriff's Office**

Post Office Box 727 Tallahassee, Florida 32302-0727  
Office Phone 850-922-3300 Jail Phone 850-922-3500

**CITIZEN'S ACADEMY  
APPLICATION**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP

RACE: \_\_\_ MALE: \_\_\_ FEMALE: \_\_\_ BIRTHDATE: \_\_\_\_\_ SS# \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

DRIVERS LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ EMPLOYED BY: \_\_\_\_\_

PHYSICAL CONDITION: (check one ) \_\_\_ EXCELLENT \_\_\_ GOOD \_\_\_ FAIR \_\_\_ POOR

WHY DO YOU WISH TO ATTEND THE CITIZEN POLICE ACADEMY? \_\_\_\_\_  
\_\_\_\_\_

HOW DID YOU FIRST HEAR ABOUT THE CITIZEN POLICE ACADEMY? \_\_\_\_\_  
\_\_\_\_\_

HAVE YOU EVER BEEN ARRESTED/CONVICTED OF A CRIME? \_\_\_ Y \_\_\_ N (If yes, explain)

GIVE THE NAMES AND ADDRESSES OF TWO CHARACTER REFERENCES:

- 1. \_\_\_\_\_ 2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By my signature below, I acknowledge the above information is a true and accurate representation and that **all of the above information is required** in order for the LCSO to conduct a background inquiry with the Department of Law Enforcement and make a determination of eligibility for the Citizen's Academy. I also understand I can only take this program one time and if I decide to volunteer, I can be removed from ALL activities if removed from one.

SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

Applications may be mailed/faxed or delivered to:  
Leon County Sheriff's Office Crime Prevention Unit-  
P.O. Box 727 Tallahassee, Florida 32302 or fax (850)922-3379  
For additional information call (850) 922-3323 or visit us at [www.leoncountyso.com](http://www.leoncountyso.com) to download applications

**LEON COUNTY SHERIFF'S OFFICE  
CITIZEN'S ACADEMY  
WAIVER, RELEASE AND INDEMNIFICATION**

The LEON COUNTY SHERIFF'S OFFICE (the "SHERIFF" ) conducts a course known as the "Citizen's Academy", open to local citizens in which citizens are exposed to all major aspects of the operations of the LEON COUNTY SHERIFF'S OFFICE. The SHERIFF conducts classes on and off the premises of the LEON COUNTY SHERIFF'S OFFICE, including particularly (but without limitation), class sessions at the **Pat Thomas Law Enforcement Academy**. In consideration for the privilege and benefits to be derived from participating in the Citizen's Academy, the SHERIFF is requiring all participants therein to execute this waiver, release and indemnification.

Participation in the Citizen's Academy class sessions may involve physical activities such as, but not limited to, lifting, walking, riding, the discharge of firearms and will include risks such as falls, interaction with other participants, effects of weather, the physical conditions of the facilities and features and equipment located thereon, together with the inherent risks of being in close proximity to the discharge of firearms and the utilization of various items of equipment and other weaponry used by law enforcement personnel. Participant expressly assumes these and all other risks arising in any way out of Participant's participation in Citizen's Academy activities; including any transportation provided to, from and between such activities. Participant represents and warrants him/herself to be physically fit and able to participate in such activities, and agrees to stop and request assistance if experiencing any symptoms or other conditions which would make it difficult or unsafe to continue; further understanding that Participant is solely responsible for their own health and safety. Participant understands that at all Citizen's Academy class times, the privilege of their participation shall be governed by the SHERIFF (inclusive of SHERIFF'S deputies, officials, representatives and employees) and Participant will abide by and follow any directions given by such SHERIFF'S personnel.

On behalf of Participant's self, heirs, executors and assigns, Participant does hereby waive and personally assumes any and all risks and liability for damages, losses, personal injuries or death which Participant might suffer, sustain or cause while participating in any activities of the Citizen's Academy and Participant does hereby release and forever discharge the LEON COUNTY SHERIFF'S OFFICE, SHERIFF LARRY O. CAMPBELL and his deputies, officers, agents, employees representatives and other personnel (in their official and individual capacities), the County of Leon County, Florida, and the owners and personnel of the Pat Thomas Law Enforcement Academy or other premises and facilities utilized by Sheriff for Citizen's Academy activities (collectively, the "Releasees") from any and all claims, demands, actions, damages, or suits at law or equity of whatever nature which Participant has or may hereafter acquire against the Releasee as a result of Participant's voluntary participation in the aforescribed activities, and Participant hereby holds harmless and agrees to indemnify Releasees for all damages, attorneys fees and costs which may be incurred in defending any such demands, claims, actions and the like.

**WITNESSES:**  
(Two witnesses, please)

**YOUR SIGNATURE**

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Printed Name \_\_\_\_\_

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

Signature \_\_\_\_\_

\_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_