

TOWN OF SPRING HILL

P. O. BOX 57
SPRING HILL, TENNESSEE 37174

L I A B I L I T Y R E L E A S E

I, _____, do, by my signature, release
(print)
The Spring Hill Police Department, The Town of Spring Hill and/or
its employees from civil liability for injury I receive while
riding with, or accopanying an employee in any manor. I further
release the above from civil liability should my voluntary work
result in my death.

(date)

(sign)

witness: _____

witness: _____

State of Tennessee)
County of _____)

Sworn To And Subscribed Before Me The Undersigned, This The
_____ Day Of _____ 19____.

Notary

My Commission Expires: _____ 19____.

Approved Signature Chief of Police

Approved Signature Mayor

(SAMPLE DRAFT--To be revised by city attorney)