

Belton Citizen Police Academy **Application Form**

Name: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Place of Employment/Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email address: _____

Texas Driver's License or Identification Number: _____

Do you possess a Concealed Handgun Permit? _____

Have you ever been charged with a felony offense or crime in involving moral turpitude? (Please explain): _____

Shirt Size? (circle one) S M L XL XXL XXXL

Please Read the Following Prior to Signing and Returning this Application.

1. By completing and returning this application form with your signature, you agree to allow the Belton Police Department to conduct a background check on you as a prerequisite to attending the Academy.
2. If you possess a Concealed Handgun Permit, you are not allowed to carry a firearm while on Belton Police property or during any of the Academy classes, regardless of location.

Release of Liability Participation in the Belton Citizen Police Academy

I, _____ agree to assume any and all liability and hold the
(Applicant's Name / Please Print)

Belton Police Department and the City of Belton, its officers, employees, and agents harmless from all claims or actions which I ever had, now have, or may have in the future or any liability for injuries or damages which occur to me as a result of my participation in the Belton Citizen Police Academy. I expressly waive all claims for medical expenses, loss of services, or other claims to which I may otherwise be entitled, and I agree to indemnify and hold harmless the Belton Police Department, the City of Belton, its officers, employees, and agents from all claims made by third parties against it or them which result from my activities with the Belton Citizen Police Academy. I understand that the Belton Police Department, City of Belton, its officers, employees, and agents, are not waiving any sovereign or governmental immunity which it or they have under Texas law.

I have read and understood this release and sign it voluntarily and with full knowledge of its significance.

Applicant's Signature: _____ Date: _____

Please return to the Belton Police Department, 711 E. 2nd Ave., PO Box 120, Belton, Texas 76513, email: police@beltontexas.gov

