



TEXAS CITY POLICE DEPARTMENT EXPLORER APPLICATION

(Please Print or Type)



APPLICANT'S NAME: _____
LAST NAME FIRST MIDDLE

RESIDENCE ADDRESS: _____
NUMBER STREET CITY STATE ZIP CODE

SCHOOL ADDRESS: _____
NUMBER STREET CITY STATE ZIP CODE

HOME TELEPHONE: _____

SCHOOL TELEPHONE: _____

GRADE : _____

TEXAS DRIVER LICENSE AND/OR IDENTIFICATION NUMBER: _____

MOTHER'S NAME: _____
LAST NAME FIRST MIDDLE

ADDRESS: _____
NUMBER STREET CITY STATE ZIP CODE

HOME/EMERGENCY NUMBERS: _____

FATHER'S NAME: _____
LAST NAME FIRST MIDDLE

ADDRESS: _____
NUMBER STREET CITY STATE ZIP CODE

HOME/EMERGENCY NUMBERS: _____

REFERRED BY: _____

Have you ever been arrested for any offense other than a traffic violation? Please circle one YES NO
(If yes, please where, when and describe the circumstances, use back if necessary)

Describe in your own words why you want to be in the Texas City Police Explorer program.

I hereby authorize the Texas City Police Department to make an examination of criminal records for the purpose of evaluating my application.

Signature

Parent's Signature

Print Name

Return to: Texas City Police Department
Attn: Corporal Clay Ruyle – Texas City Explorer Post 200
1004 – 9th Avenue North
Texas City, Texas 77590

WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

THE STATE OF TEXAS) (
COUNTY OF GALVESTON) (

KNOWN ALL MEN BY THESE PRESENTS:

THAT I, the undersigned _____, for and in consideration of the
Participant Name

Privilege of being a participant in the Explorer Program of the City of Texas City, and allowed use of City of Texas City property, equipment and services, including but not limited to the firing range, and recognizing that such activity involves certain inherent risks and danger to my property and person, do hereby agree to assume the risks attendant to such activity, to include property damage and physical injury from such service, and do hereby release and hold harmless the City of Texas City, its Police Department, agents and employees, in both their public and private capacities, from any and all liability, claims, suits, demands and causes of action which may arise.

It is further agreed that the execution of this release shall not, constitute a waiver by the City of Texas City of the defense of governmental immunity, where applicable, or any other defense recognized by the Courts of this State.

Signed, this the ____ day of _____, 20____.

Participant Signature

Parent Signature

SUBSCRIBED AND SWORN to before me this ____ day of _____, 20____, A.D.

Notary Public State of Texas