



**Youth Fire Academy**  
**Food Waiver and Release from Liability**

By signing this waiver, I \_\_\_\_\_ release Willingboro Township and Willingboro FIRE & EMS from any liability with regard to possible spoilage or food-borne illness from donated food from local businesses in the community during the Youth Fire Academy. I am aware the food was prepared off premises by the local business and picked up/delivered to the Fire Station by either delivery driver or FIRE/EMS personnel. I also am indicating that I accept full responsibility my child(ren) does become sick after eating said food.

Participant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_