



Franklin County Department of Health
15 South Oak,
Union, MO 63084

Public Health
Prevent. Promote. Protect.

I, _____, being over the age of eighteen (18), do hereby knowingly and voluntarily agree to participate in the weapons of mass destruction exercise sponsored by the Department of Justice (DOJ) and Federal Emergency Management Agency (FEMA) held on _____, 2011, at the _____. I do hereby knowingly and voluntarily agree to participate in the decontamination process.

In order to participate in this exercise, I knowingly and voluntarily execute this Authorization and Release with express intent to forever discharge the United States Government and all its agents, officers and employees, from any and all actions, suits or claims that may arise out of this exercise, including but not limited to any claims for personal injury, illness, death, and damage to property, that I or my heirs may now have or may have in the future.

Further, I hereby knowingly and voluntarily consent that the United States Government shall have the right to publish or use any photographs, movie films, videotapes and/or sound records, or any part thereof, that they have taken or made of me on this date or in which I may have been included, for publicity, advertising or any other lawful purpose in conjunction with my own or a fictitious name, or in reproductions thereof in color or otherwise. I hereby knowingly and voluntarily waive all claims for any compensation for use or for damages. I hereby knowingly and voluntarily waive any right that I may have to inspect and/or approve the finished product or the use to which it may be applied.

I hereby warrant that I have every right to contract in my own name in the above regard. I state further that I have read the above Authorization and Release, prior to its execution, and that I am fully familiar with the contents thereof.

I agree that this Authorization and Release shall be interpreted in accordance with the laws of the District of Columbia, and any action arising under the terms or conditions of this Authorization and Release shall be filed in a court of competent jurisdiction in the District of Columbia.

IN WITNESS WHEREOF, I have signed below on _____, 2011.

Name
Print Name:

Witness