

# Application For Atherton Police Citizens' Academy



Please print or type. The application must be fully completed to be considered.

## Personal Information – Must be 21 years or older

Name

Address		City	State	Zip
Phone Number	Mobile Number	Email Address		
Shirt size S M L XL		Why are you interested in the Citizens' Academy?		

## Signature Disclaimer

I understand that my signature authorizes the Atherton Police Department to verify all statements made on this application.

In compliance with the Americans with Disabilities Act, those requiring accommodations should notify Jennifer Frew at 650-752-0503 prior to the start of the Citizens' Academy.

I hereby absolve the Town of Atherton, its employees and officers from all liability, which may arise as the result of my participation in this Academy.

Name (Please Print)	Signature
Date	



Return the form to Jennifer Frew  
[jfrew@ci.atherton.ca.us](mailto:jfrew@ci.atherton.ca.us)