

Town of New Castle Community Liaison
(Formerly Known as Community Advocate)

Complainant Waiver and Release of Liability

The Town of New Castle (the “Town”) has created the Office of the Community Liaison to create a more effective avenue for community members to lodge anonymous complaints regarding the New Castle Police Department. Members of the Office of the Community Liaison are volunteers from the greater community.

In utilizing the Community Liaison, I hereby acknowledge that such individual is a volunteer and is in no way employed by, and/or a representative of, the Town. In utilizing the Community Liaison, I further acknowledge that such individual is not my attorney, my advocate, and/or my representative. As such, any information that I relay to the Community Liaison is not confidential and/or protected, including, but not limited to attorney-client privilege. However, I understand that the information which I provide to the Community Liaison shall not be shared publicly by the Community Liaison or to anyone outside of the investigation process. Rather, I understand and agree that I am utilizing the Community Liaison solely to:

- Assist me with filling out a complaint;
- File a complaint on my behalf;
- Maintain my anonymity, if I request;
- Act as an intermediary with the police for the purpose of conducting a complete and thorough investigation;
- Allow me to be fully informed about the investigation while ongoing and when completed;
- Convey the results of the investigation to me after the investigation is complete; and
- Allow me closure.

By signing this Waiver and Release of Liability, on behalf of myself, my heirs, next of kin, successor in interest, assigns, personal representatives and agents, I hereby expressly agree to indemnify and hold harmless the Community Liaison, as well as the Town, its officers, employees, and agents against any and all claims, demands, damages, rights of action, or causes of action, of any person or entity, that may arise from my use of the Community Liaison.

I hereby unconditionally waive and release all claims and causes of action that I have or may have, or anyone who may claim through me has now, or may have in the future against the Community Liaison, as well as the Town, its officers, employees, and agents for any liability of any kind whatsoever in connection with my use of the Community Liaison.

BY SIGNING THIS WAIVER AND RELEASE OF LIABILITY, I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE FOREGOING, AND THAT I KNOWINGLY AND VOLUNTARILY EXECUTED THIS DOCUMENT WITH FULL KNOWLEDGE OF ITS CONTENT.

Signature: _____

Date: _____

Please Print Name: _____