

MISSING IN AMERICA PROJECT

www.miap.us 3/7/2019

PRIVACY STATEMENT

I, the undersigned, under the provision of 5 U.S.C. § 552a (2000), will not disclose any information which I may obtain, view, or witness, to include veteran's information, family information, personal information which may or may not be included in a funeral homes/coroners information base to anyone not otherwise listed on the Missing In America Projects authorized personnel list and only when they have a need to know.

Missing in America Project Coordinator

Date

RELEASE OF LIABILITY

I, and my heirs, in consideration of my participation in the "Missing in America Project" (MIAP) at (FH/coroner address)_________ hereby release (FH/coroner name),________ its officers, employees and agents and any other people officially connected with this project, from any and all liability for damage to or loss of personal property, sickness or injury from whatever source, legal entanglements, imprisonment, death, or loss of money, which might occur while participating in this MIAP project. Specifically, I release said persons from any Liability or responsibility for my personal health and physical conditions or for any accident occurred on the premises or in the course of my volunteer services. I am aware of the risks of participation. I hereby state that I am in sufficient physical condition to accept the level of physical activity required for any and all activities associated with the MIAP By-Laws and Resolutions. I understand that participation in this program is strictly voluntary and I freely chose to participate.

Missing in America Project Coordinator

Date