



Rhode Island Department of Transportation

Adopt-A-Highway Program Minor Release Form

I, a member of the _____, have received and read the roadside safety training information as a prerequisite to participation in the Adopt-A-Highway Program.

I do hereby release and discharge the State of Rhode Island, the Rhode Island Department of Transportation, and their officers, agents and employees, from all claims, demands and causes of action of every kind whatsoever for any damages and, or, injuries which may result from my participation in the Adopt-A-Highway and other voluntary activities on or near the highway right-of-way.

STUDENT/MINOR NAME

SIGNATURE & DATE

PARENT/GUARDIAN NAME

SIGNATURE & DATE
