

**CONSENT FORM
ADOPT A HIGHWAY
KANSAS DEPARTMENT OF TRANSPORTATION**

THE KANSAS DEPARTMENT OF TRANSPORTATION'S ADOPT A HIGHWAY PROGRAM IS PART OF AN EFFORT TO MAKE OUR ROADWAYS LITTER FREE. THE PROGRAM IS VOLUNTARY, DESIGNED FOR NON-PROFIT ORGANIZATIONS, AND IS OPEN TO GROUPS THAT DO NOT DISCRIMINATE ON THE BASIS OF RACE, RELIGION, COLOR, OR SEX. EACH VOLUNTEER (ADOPTING) GROUP ASSUMES THE RESPONSIBILITY FOR AN ASSIGNED SECTION OF HIGHWAY AND AGREES TO REMOVE LITTER AND TRASH A MINIMUM OF THREE TIMES A YEAR FOR AT LEAST A TWO YEAR PERIOD. THE KANSAS DEPARTMENT OF TRANSPORTATION WILL WORK WITH THE ADOPTING GROUP TO SELECT THE SPECIFIC SECTION OF HIGHWAY TO BE ADOPTED. SOME HIGHWAYS MAY NOT BE CONSIDERED FOR A NUMBER OF REASONS, USUALLY SAFETY RELATED CONDITIONS.

PARENTAL ACKNOWLEDGEMENT OF WARNING AND RELEASE

I, _____, PARENT / GUARDIAN OF _____, ACKNOWLEDGE THAT I AND MY CHILD HAVE READ AND UNDERSTAND THE ADOPT A HIGHWAY SAFETY TIPS BROCHURE AND THAT WE HAVE ATTENDED AN ADOPT A HIGHWAY SAFETY MEETING. I ACKNOWLEDGE THAT I AND MY CHILD ARE AWARE OF THE MANY DANGERS ASSOCIATED WITH WORKING ON HIGHWAY RIGHT OF WAY. I CONSENT TO MY CHILD'S PARTICIPATION IN THE ADOPT A HIGHWAY ACTIVITIES.

I RELEASE AND DISCHARGE THE STATE OF KANSAS, THE KANSAS HIGHWAY ADVISORY COMMISSION, THE KANSAS 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, OR MY CHILD'S PARTICIPATION IN THE ADOPT A HIGHWAY AND OTHER VOLUNTARY ACTIVITIES ON OR NEAR THE HIGHWAY RIGHT OF WAY.

I FURTHER AGREE TO HOLD HARMLESS THE STATE OF KANSAS, THE KANSAS HIGHWAY ADVISORY COMMISSION, THE KANSAS DEPARTMENT OF TRANSPORTATION, AND THEIR OFFICERS, AGENTS AND EMPLOYEES, FROM LIABILITY FOR ANY DAMAGES OR INJURIES RESULTING FROM ANY ACTS OR FAILURE TO ACT ON MY PART OR MY CHILD'S PART, DURING OUR PARTICIPATION IN SAID VOLUNTARY ACTIVITIES ON OR NEAR THE HIGHWAY RIGHT OF WAY. I ACKNOWLEDGE THAT THIS CONSENT FORM IS VALID AND EFFECTIVE FOR TWENTY-FOUR (24) MONTHS.

DATE

PARENT / GUARDIAN'S SIGNATURE

CHILD'S ACKNOWLEDGEMENT OF WARNING AND RELEASE

I, _____ ACKNOWLEDGE THAT I HAVE READ AND I UNDERSTAND THE ADOPT A HIGHWAY SAFETY TIPS BROCHURE AND THAT I HAVE ATTENDED AN ADOPT A HIGHWAY SAFETY MEETING. I ACKNOWLEDGE THAT I AM AWARE OF THE MANY DANGERS ASSOCIATED WITH WORKING ON HIGHWAY RIGHT OF WAY. I CONSENT TO MY PARTICIPATION IN THE ADOPT A HIGHWAY ACTIVITIES.

I RELEASE AND DISCHARGE THE STATE OF KANSAS, THE KANSAS HIGHWAY ADVISORY COMMISSION, THE KANSAS 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.

I FURTHER AGREE TO HOLD HARMLESS THE STATE OF KANSAS, THE KANSAS HIGHWAY ADVISORY COMMISSION, THE KANSAS DEPARTMENT OF TRANSPORTATION, AND THEIR OFFICERS, AGENTS AND EMPLOYEES, FROM LIABILITY FOR ANY DAMAGES OR INJURIES RESULTING FROM ANY ACTS OR FAILURE TO ACT ON MY PART DURING MY PARTICIPATION IN SAID VOLUNTARY ACTIVITIES ON OR NEAR THE HIGHWAY RIGHT. OF WAY. I ACKNOWLEDGE THAT THIS CONSENT FORM IS VALID AND EFFECTIVE FOR TWENTY-FOUR (24) MONTHS.

DATE

CHILD'S SIGNATURE

NOTE: This information is available in alternative accessible formats. To obtain an alternative format, contact the KDOT Bureau of Transportation Information, Docking State Office Building, #754, Topeka, Kansas, 66612-1568 or phone (785) 296-3585 (Voice)/(TTY).