

State of Hawaii Department of Transportation Highways Division, Oahu District

ADOPT-A-HIGHWAY RELEASE FORM FOR MINORS

I, a member of the	1 111	(Organization Name), have attended a eld by my group as a prerequisite to participate in the Adopt-A-		
roadside safety meetin Highway Program.	ig held by my group as	a prerequisite to participate	n the Adopt-A-	
officers, agents and en whatsoever for any da	nployees, from all clain mages and, or, injuries	Hawaii, Department of Trans, demand and causes of a which may result from my ary activities on or near the	ction of every kind participation in the	
Name of Minor:				
	Print Name	Signature	Date	
Parent / Guardian: _				
	Print Name	Signature	Date	
Address:				

Email to adopt-a-highway@stormwaterhawaii.com

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