

MARYLAND STATE HIGHWAY ADMINISTRATION
ADOPT-A-HIGHWAY PROGRAM

PARTICIPANT'S AGREEMENT

I have read and understand the Maryland Department of Transportation State Highway Administration's Conditions for Participation in the Adopt-A-Highway Program. I have been provided the following documents: Conditions for Participation and Safety Equipment and Procedures. I have read the conditions and procedures and have been shown the safety video and / or attended a safety presentation. I understand these Conditions and Procedures and agree to obey and abide by them and any other rule adopted or implemented by the SHA during my participation in the Adopt-A-Highway Program.

I am aware of the potentially hazardous nature of the work to be performed. Except to the extent any injury or damage is caused by the negligence of the State, its officers, agents or employees, I agree to waive any claim against the State with respect to any injury or damage arising out of my participation in the Adopt-A-Highway Program.

Name of Program Participant (Please Print)

Signature of Program Participant

Signature of Legal Guardian (If Participant is under 18)

Participant's Street Address

City, State, Zip

Telephone Number

Date

Name of Group