CodeRED

DO NOT CALL RELEASE FORM

I am aware that the Town of Glocester has subscribed to an alert system known as CodeRED. The Town of Glocester may use the alert system to communicate with the public in cases where prompt notice to protect life, health or property is advantageous.

I acknowledge that providing the alert system known as CodeRED by the ***Town of Glocester*** is a "governmental function".

As such, the ***Town of Glocester***, its officers, agents and employees enjoy immunity when providing the CodeRED alert system services.

I choose to be placed on the **DO NOT CALL** list for CodeRED alerts issued by ***Town of Glocester***. By signing this release, I waive all claims against the ***Town of Glocester*** and CodeRED, their officers, agents and employees in the event that members of my household or my property or I are adversely affected in the absence of timely notice of any event.

Name: _____

Address: _____

_____

Telephone number(s): _____

Names of others residing at the above address: _____

_____ _____

Signature Date