

**WAIVER OF CONFIDENTIALITY**  
**(complaints involving juveniles)**

We, \_\_\_\_\_, state and certify  
*(Type or print names)*

that we are the parents/or legal guardians of: \_\_\_\_\_  
*(Type or print juvenile's name)*

Our address is: \_\_\_\_\_

Our telephone number is: \_\_\_\_\_

Our social security numbers are: \_\_\_\_\_  
*(Type or print SSN)*                      *(Type or print name)*

\_\_\_\_\_ *(Type or print SSN)*                      *(Type or print name)*

As the parents and/or legal guardians of the above named juvenile, we are aware that any police reports and/or records involving said juvenile's arrest are strictly confidential by law. See Sec. 571-84(e), Hawaii Revised Statutes, Sec. 571-11(1) H.R.S., and Sec. 92F-22(4), H.R.S. We agree to forever indemnify and hold harmless the County of Hawaii, its agents, representatives, successors and assigns for any claim, charge or lawsuit for releasing, and forever waive any claim of confidentiality in any police records and/or reports involving said juvenile's arrest, to the Hawaii County Police Commission. We also acknowledge and agree that we are not entitled to any police reports and/or records involving said records if any criminal investigation and/or criminal prosecution is pending in any of the Courts of the State of Hawaii.

\_\_\_\_\_  
*(Signature of parent/guardian)*  
Dated: \_\_\_\_\_

\_\_\_\_\_  
*(Signature of parent/guardian)*  
Dated: \_\_\_\_\_