



MISSOURI DEPARTMENT OF
REVENUE
Motor Vehicle Accident Release

Case Number

I, _____ hereby forever release and discharge _____, any heirs, executors, administrators, and all firms, corporations, and persons on their behalf liable, from all claims, demands, damages, actions, or causes of action arising from or growing out of, any and all personal injuries and property damage, now apparent as well as those which may hereafter develop as a direct or indirect result of a collision which occurred ___ / ___ / ___ , at or near _____ Missouri.

Signature	Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.	
	Printed Name of Person Giving Release	
	Signature	Date (MM/DD/YYYY) ___ / ___ / ___

Notary Required	Embosser or black ink rubber stamp seal	Subscribed and sworn before me, this _____ day of _____ year		
		State	County (or City of St. Louis)	My Commission Expires
		Notary Public Signature		
		Notary Public Name (Typed or Printed)		

Additional Release of Parent or Guardian For Injuries to Minor Child

I, _____, state that I am the parent or guardian of _____, a minor under 18 years of age, and that the above release is made at my request and that I make this release for said minor child, and that I agree to hold harmless any person against any action, claim or demand for said minor child or any other person for injuries or damages to said minor child.

Signature	Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.	
	Printed Name of Person Giving Release	
	Signature	Date (MM/DD/YYYY) ___ / ___ / ___

Notary Required	Embosser or black ink rubber stamp seal	Subscribed and sworn before me, this _____ day of _____ year		
		State	County (or City of St. Louis)	My Commission Expires
		Notary Public Signature		
		Notary Public Name (Typed or Printed)		

Mail to: Driver License Bureau
301 West High Street - Room 470
P.O. Box 200
Jefferson City, MO 65105-0200

Phone: (573) 751-7195
Fax: (573) 526-7365
E-mail: dlbmail@dor.mo.gov

Visit dor.mo.gov/drivers/ for additional information.

Form 237 (Revised 06-2013)

