

Citizen Ride-Along Program

Citizen Ride-Along Request

Dear Sir:

I would like to ride along on _____, accompanying Deputy _____
(Date)
_____ for the following reason(s): _____

NAME: _____ DOB: _____
First M.I. Last

Social Security Number _____ - _____ - _____

ADDRESS: _____

TELEPHONE #: _____

BEST TIME/DAY TO CONTACT: _____

SIGNATURE OF REQUESTOR: _____ DATE SIGNED: _____

I have read and signed the release form and I understand the provisions contained therein. I grant permission to the Page County Sheriff's Office to conduct a Criminal Records check in order to determine suitability for participation in the program.

PARENT/GUARDIAN'S SIGNATURE (if rider is juvenile): _____

FROM: Major/Captain

TO: Deputy

SUBJECT: Authorization for Citizen Ride-Along

REQUEST IS APPROVED: _____ DISAPPROVED: _____

OBSERVER AUTHORIZED TO RIDE ALONG WITH DEPUTY _____

_____ ON _____
(Date) (Hours)

Citizens approved for a ride-along must be dressed appropriately or the ride along will be cancelled at the host Deputy's discretion. Casual business attire is recommended.

Citizen Ride-Along Program

RELEASE AND WAIVER

KNOW ALL MEN BY THESE PRESENT, that I _____, on my own behalf and on behalf of my heirs, next of kin, executors, administrators, estate, agents and assigns, and representatives of any nature whatsoever, for and in consideration of the authorization and permission to accompany deputies or any deputy of the office during the course of their or his duties, which has been granted to me at my voluntary request, after having been fully advised of the potential hazards of such activity or activities, do hereby WAIVE AND RELEASE all demands, damages, actions, causes of action, suits and claims of any nature whatsoever, whether in law or in equity, that I or my heirs, next of kin, executors, administrators, estate, agents and assigns, and representatives of any nature whatsoever might otherwise have against the county, the Sheriff, and each and every deputy, official, member, appointee, agent and attorney thereof and therefore, and his or her heirs, next of kin, executors, administrators, and estate, on account of my death or injuries, both to person and to property, whether foreseeable or not, which may occur, directly or indirectly, or develop at anytime in the future as a result of my activities or association with the Sheriff's Office, whether in a Sheriff's vehicle, in the Sheriff's Office Building, or otherwise in association with the Sheriff's Office and deputies and officials thereof in any manner whatsoever.

It is expressly agreed and understood that this WAIVER AND RELEASE shall apply for the express purpose of precluding forever all claims, suits, demands, damages, and causes of action that I or my heirs, next of kin, executors, administrators, estate, agents and assigns and representatives of any nature whatsoever might otherwise assert against any of the aforesaid parties as a result of my association and activities with the Sheriff's Office during:

I hereby declare that the terms of this WAIVER AND RELEASE have been fully read and understood by me, and freely and voluntarily entered into and accepted by me, and I hereby acknowledge receipt of a copy of this agreement.

In further consideration of the aforesaid authorization and permission granted to me to accompany a deputy or deputies of the Sheriff's Office at my own request, I hereby promise and agree to fully comply with all instructions given to me for the purpose of protecting my personal safety and that of my property.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____ day of _____, 20_____

This waiver must be approved by the Major/Captain

(SEAL)

(Signature)

(Notary Public)

(Parent/Guardian's Signature if requestor/rider is a juvenile)