

Police Department

2600 Fifth Street - Davis, California 95618-7718

Business: (530) 747-5400 - Fax: (530) 757-7102 - TDD: (530) 757-5666

Administration: (530) 747-5405 - Investigations: (530) 747-5430

Initials:

ID checked on
date of ride

Internal Use Only
Ride Along

Date _____

Time _____



**WAIVER, RELEASE AND INDEMNIFICATION OF ALL CLAIMS
FOR PERSONAL INJURY AND PROPERTY DAMAGE**

Ride-Along Program

The Davis Police Department offers a very limited ride-along program. A ride-along will generally only be approved for sworn police officer applicants, those with verified academic need, the media or compelling reason. The Office of the Police Chief must approve a ride-along.

This application, waiver and release must be signed and submitted to the police department for consideration. If the ride-along is approved, a Patrol Commander will make contact with you to schedule the ride-along.

This document affects your legal rights. You must read and understand it before signing it.

Name: _____ DOB: _____ Drivers Lic # _____

Address: _____ Telephone Number: _____

Email: _____

Reason for the ride along: _____

Professor's Name if school related: _____ Name of School: _____
(If school related)

If under 18 years of age, name of legal guardian: _____

I, the above named person being above the age of eighteen years and not a member of the Davis Police Department, and, if under age of eighteen years, the legal guardian of the above-named person, in consideration of the services of the Davis Police Department, hereby acknowledge, agree and covenant with, and release and discharge the Davis Police Department on behalf of myself, my heirs, assigns, personal representatives and estate as follows:

ACCEPTANCE OF RISKS

I have made a voluntary request to accompany and ride as a guest with a member of the Davis Police Department. I understand and acknowledge that this activity bears certain known risks and unanticipated risk of bodily harm or damage to my property. I also understand and acknowledge that as a result of my participation in this activity, I may be required to serve as a witness in an administrative, civil or criminal proceeding. I agree, covenant and promise to comply with the Citizen Rider's Responsibilities, a copy of which is attached hereto and has also been provided to me. I also agree, covenant and promise to accept and assume all responsibility and risk, known or unknown, anticipated or unanticipated, for any bodily harm or damage to property arising from my participation in this activity.

RELEASE, INDEMNITY AND PROMISE NOT TO SUE

I hereby voluntarily release and forever discharge the Davis Police Department, its agents or employees, and the City of Davis, its agents or employees from any and all liability, claims, demands, actions or rights of action which arise out of or are in any way related to or connected with my participation in this activity, including specifically, but not limited to, the negligent acts or omissions of the Davis Police Department, its agents or employees, for any and all injury, death, illness or disease, and damage to myself or to my property. I further

agree, promise and covenant to hold harmless, defend and indemnify the Davis Police Department, its agents or employees from all defense cost, including attorney's fees, or from any other cost incurred in connection with claims for bodily injury opportunity damage which I may negligently or intentionally cause to any person other than myself in the course of my participation in this activity.

AUTHORIZATION FOR CRIMINAL RECORDS CHECK

I hereby authorize the Davis Police Department to conduct a background records check to determine whether I have any criminal convictions or pending criminal charges. A felony or misdemeanor criminal conviction may be grounds to deny a request for a ride along.

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE & ASSUMPTION OF RISK BY READING IT BEFORE I SIGNED IT ON BEHALF OF MYSELF AND MY HEIRS.

Signature

Date

Parent's Signature (If Under 18 Years Of Age)

Date

RIDER RESPONSIBILITIES

1. Use seat belts.
2. On stops, remain in the vehicle unless otherwise directed by the officer.
3. Do not talk to any person contacted by an officer.
4. Follow all instructions of the officer to whom you have been assigned.
5. Keep confidential names and/or other information which, if made public, could be detrimental to public safety or which may jeopardize the community standing of any citizens.
6. If a dangerous situation arises, i.e., gunfire, fights, fire, etc., do not attempt to assist the officer. Instead, get away quickly, and call the Police Department and explain what happened.
7. If an officer is dispatched to a hazardous call, exit the patrol vehicle and wait to be picked up after the danger is over.
8. Stay in the vehicle at the scene of a call unless the officer indicates otherwise (based on the nature of the call and the officer's discretion concerning the circumstances of the call). If the rider stays in the vehicle, the officer may explain the circumstances of the call when they return or as soon as possible.

Internal Use Only

Records/Dispatch

- Check to make sure waiver is signed
- Incident # _____
- Criminal History and All Systems check Initials: _____ Date: _____

Approved: ___ Yes ___ No _____
Office of the Police Chief

Date

Approved Request Routed to Patrol Commander _____
Date