CITIZEN OBSERVER (RIDE -ALONG) PROGRAM

APPLICATION

LAST NAME:_____ FIRST NAME:_____MI_____

MAIDEN NAME/OTHER NAMES USED (IF APPLICABLE) _____

STREET/MAILING ADDRESS:_____CITY_____STATE_____ZIP_____

PHONE NUMBER: (HOME)_____ (CELL)_____

DATE OF BIRTH:_____ SSN:_____

I hereby request permission to ride as a civilian observer in a Sheriff's Office patrol vehicle because*:*

_____

_____

_____

_____

I further agree with and voluntarily sign the Release and Hold Harmless Agreement. {On reverse side}

All requested dates listed below are at least ten *(10)* days after submitting this application:

1st Choice Date:_____Time_____

2nd Choice Date_____ Time_____

3rd Choice Date_____ Time_____

*Signature:*_____*Date:* _____

FOR OFFICE USE ONLY

DATE/ TIME RECEIVED _____ BY: _____

Checks: CCH:_____Wanted:_____*DL:*_____

Approved/Denied:_____Notified By:_____Date: _____

Assigned Date / Time/ Deputy Sheriff:_____

Host Deputy Sheriff Name/ Comments:_____

_____

SHERIFF'S OFFICE CITIZEN OBSERVER (RIDE-ALONG) PROGRAM

RELEASE AND HOLD HARMLESS AGREEMENT

In consideration of being permitted to ride in a vehicle owned and operated by the County, for the expressed purpose of observing operations and facilities of the Sheriff's Office, the undersigned agrees to release and hold harmless the County, its agents, employees, and elected official from any and all liability to me for personal injury or death or any property damage., whether proximate or remote sustained during or as a result of my ride as an observer.

I understand that I will be a guest passenger in the vehicle in which I ride and have not offer any payment to the Sheriff's Office or its employees for the opportunity to ride. I further understand that I may be summoned as a witness in any proceeding as a result of my observations.

This observation is for my educational benefit. At all times, I agree to obey all orders, instructions, and commands of the deputy sheriff of the Sheriff's Office. I fully realize and appreciated the basic nature of law enforcement and the possibility that situations may arise which might result in my exposure to danger of physical harm or injury, including traffic accidents, and I am willing to accept these risks. I further agree to keep confidential, anything which I may observe or hear. I understand that my observation ride may be terminated at any time without notice.

I authorized the Sheriff's Office to conduct a complete record check of me prior to riding and understand that any information of an adverse or criminal nature may disqualify me.
I freely and voluntarily sign this Release and Hold Harmless Agreement in sole reliance of my own independent judgment.

Signature:_____Date:_____

PARENTAL ENDORSEMENT {For applicants under age of 18}: I *have read and understand the Release and Hold Harmless Agreement and agree to be bound to its provisions as they apply to my child _____. I agree to assume full responsibility for my child as it would pertain to the provisions set forth.*

Parent/Guardian Signature:_____Date:_____