

CIVILIAN RIDE-A-LONG PROGRAM

FAIR GROVE POLICE DEPARTMENT

P.O. Box 107 Fair Grove, Missouri 65648 Phone: (417) 759-6482 Fax: (417) 759-6480

Civilian Ride-A-Long Application

Name (Please Print)			
Date of Birth	Rac	ceSex_	Age
Home Address:		City, State, Zip	
Social Security Number:		Home Phone: (
In Case of Emergency Notify	•	Phone: (
Riding time desired (check or	ne) Day Shift	Evening Shift	Midnight Shift
What prompt your interest in	the Ride-A-Lor	ng program?	
Fa	ir Grove Police D	epartment Use Only	
Officer assigned to:		DSN: _	
Date of Ride-A-Long:		Shift:	
Records Check: Yes 1	No N/A	No Record	Record Attached
Officer/DSN:			
Notes:			
Signature of Police Chief		Dat	e:

RULES / REGULATIONS

- 1. The civilian rider is an <u>observer only</u> and should not become involved in or interfere with any situation either physical or verbally.
- 2. Civilian riders should be dressed in either business attire or neat, clean, casual attire. Jeans, shorts, spandex, leggings, t-shirts and sweatshirts are not acceptable.
- 3. Participants will not be allowed to carry a weapon while on participating in a ride-along unless he/she is a commissioned police officer with proper credentials, despite current concealed weapons laws
- 4. Cameras and tape recorders are not permitted
- 5. Civilian riders will be allowed to observe as much of any situation as is possible, consistent with their the officer's safety; however, they may not leave the police vehicle unless given permission to do so by the officer. The Supreme Court of the United States has ruled that riders are prohibited from entering into a private residence, as cited by the Fourth Amendment.
- 6. The supervising officer may terminate the ride-a-long if the participants fails to follow the regulations or is acting in a manner inconsistent with the best interest of the police department and/or violation of officer and public safety practices.
- 7. The participant may request that the ride be terminated at any time. The participant will be returned to the police station as soon as the officer determines it is practical.

I (printed name)	have read rules and regulations above and	
agree to all conditions as stated.		
Signature:	Date:	
Witness:	Date:	

Waiver of Liability

I acknowledge that I have requested permission from the Fair Grove Police Department (herein called "police department") to accompany a Fair Grove Police Officer (herein called "officers") in the performance of their duties both inside and outside of police department vehicles. I am aware of the various dangers involved in police work, and are aware that police department vehicles are frequently operated under emergency conditions. I am also aware that accompanying police officers in performance of their duties may frequently expose me to various and miscellaneous threats to limb and life - due to the actions of criminal suspects, prisoners and other such persons.

Being fully aware of the inherent dangers in the activities in which I propose to engage, I do hereby release, give up and abandon each and every claim, cause of action, litigation, or other right, which I may now or hereafter have against the Fair Grove Police Department, or any officer, agent, employee, or servant thereof, or any department, bureau, division, section, unit or elected officer of said city, resulting or to result from my accompanying of Fair Grove Police Officers in the performance of their official duties, whether in a Police Department vehicle or in any situation. This release is given in consideration of my being allowed to accompany Fair Grove Police Officers in performance of their official duties.

Further, I have read and agree to abide by all rules for the civilian ride-a-long program, and shall promptly and expeditiously obey all orders of all Fair Grove Police Officers.

Further, I declare that I have never been arrested for, charged with, or convicted of a felony, and I do not have any case pending involving a serious misdemeanor or felony. I also authorize the Fair Grove Police Department to perform a background check, including a criminal history and motor vehicle check to verify that all statements given in this application and release are in fact true.

I certify that I have fully read a executed this (Day)	and that I understand the pro-	vision of this release which is, (Year)	
Signature of Applicant		Date:	· · · · ·
Witness		Date:	