

## Citizen Observer Ride-Along Program Application

Last Name:	First Name:		Middle Name:		
Date Of Birth:/	/				
Street Address:		City:		State:	
County:	Home Phone:()		Work Phone:(	)	
I hereby request permi reason:	ssion to ride as a civilian obser	ver in a Sur	nriver patrol veh	icle for the	following

I further agree with and voluntarily sign the Release and Hold Harmless Agreement on the reverse side of this page.

Please submit this form **at least 24 hours prior** to the time you are requesting the Ride-Along. List your date, time, and if applicable, the Officer's name in order of preference. You will be contacted by a Supervisor.

] s†	Choice:	Date:	_/	_/	Time:	AM / PM	Officer:
2 <sup>nd</sup>	Choice:	Date:	_/	_/	Time:	AM / PM	Officer:
3 <sup>rd</sup>	Choice:	Date:	_/	_/	Time:	AM / PM	Officer:

Signature of Applicant

Today's Date

For Office Use Only					
Received by:	CCH Check Administered By:				
Date Approved / Denied (circle one)	//				
Date Forwarded to Sgt.Davis:	//				
Date Forwarded to Sgt.Beck:	//				
Officer Assigned:					

## Citizen Observer Ride-Along Program Release & Hold Harmless Agreement

In consideration of being permitted to ride in a vehicle owned and operated by the Sunriver Service District, for the expressed purpose of observing operations and facilities of the police department, the undersigned agrees to release and hold harmless the Sunriver Service District, it's agents, employees, and elected officials from any and all liability to me for personal injury, 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 offered any payment to the Sunriver Police Department or its employees for the opportunity to ride. I further understand that I may be summoned as a witness in any proceedings 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 police officer. I fully realize and appreciate the basic nature of law enforcement and the possibility that situations may arise which could 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 that I may observe or hear. I understand that my observation ride may be terminated at any time without notice.

I authorize the Sunriver Police Department to conduct a complete records check of myself 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 of Applicant

Today's Date

PARENTAL ENDORSEMENT (For applicants under the age of 18):

Signature of Parent/Guardian