

# CLOVERDALE POLICE DEPARTMENT



P.O. Box 254 / 154 S. Main Street  
Cloverdale, IN 46120  
Phone: 765-795-6800 / 4791



## CLOVERDALE POLICE RIDE-ALONG REQUEST FORM

Ride-along applicant:

1. If you are at least 16 years of age, you are welcome to apply for a ride-along by reading, completing, and signing both sides of this Ride-along Request form. If you are under 18 years of age, a parent must sign the Parental Consent Release.
2. Turn this form into the police department at least 2 weeks in advance.
3. As part of this program, you agree to undergo a comprehensive police records check.
4. Your basic responsibilities as a ride-along are to:
  - a) Remain in or return to the police vehicle in dangerous or sensitive situations (i.e., homicide, sex crimes, deaths, etc.);
  - b) Do not enter and/or remain in a crime scene;
  - c) Limit your movements to places open to the public and places you have permission to enter;
  - d) Comply with all directions given by a police officer;
  - e) Avoid operating equipment, unless an officer's safety is at risk or you receive an officer's permission;
  - f) Be an observer only. Do not become involved verbally or physically unless the officer's safety is at risk or you are directed to do so. The Town of Cloverdale will not be liable for a ride-along's unauthorized interventions.
5. You must be in civilian clothes. (Nothing that can mistaken for a uniform)
6. You cannot carry a firearm even if you have a concealed carry permit. The exception is a certified police officer.
7. The personal safety of the police officer and the departments responsibilities to the community will be at all times. Therefore, an officer may terminate your ride-along at any time, without explanation or advance notice. In addition if emergency circumstances dictate, you may be dropped off at a safe location in the field.
8. Affiliation: Explorer \_\_\_\_\_ Neighborhood Rep. \_\_\_\_\_ Spouse \_\_\_\_\_ Citizen \_\_\_\_\_  
Other (Explain) \_\_\_\_\_
9. What is the reason for your ride-along request? (School/class, interested citizen, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Today's Date \_\_\_/\_\_\_/\_\_\_ Date Requested \_\_\_/\_\_\_/\_\_\_ Time \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_/\_\_\_/\_\_\_ Middle \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

DOB \_\_\_/\_\_\_/\_\_\_ Race \_\_\_\_\_ Emergency Contact \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Have you been arrested or convicted for a crime? \_\_\_\_\_ If yes, for what? \_\_\_\_\_

**HOLD HARMLESS AGREEMENT**

I, the undersigned, have read and understand the reverse side of this form and ask the Cloverdale Police Department for permission to ride, as an observer only, in an authorized Police Department motor vehicle. This observation is for the purpose of my educational benefit. If permission is granted, I agree to obey all instructions, orders, and commands given to me by officers) at a scene or in command of any vehicle in which I may be riding. I realize and appreciate the nature of law enforcement work, and know that I might encounter violence, uncertainty, danger and criminality during a ride-along. I understand that I may encounter situations during a ride-along that expose me to a risk of physical harm or injury, including, but not limited to, motor vehicle accidents. I freely and voluntarily accept these risks. I further agree to keep confidential my observations when requested to do so by a member of the Police Department.

I further understand I will be a guest passenger in the police vehicle in which I ride. I have not offered any payment to the Police Department or any of its employees for the opportunity to ride in a police vehicle and observe law enforcement activity.

WHEREFORE, in consideration of the educational benefit I will gain by riding-along with a police officer, I hereby agree to hold the Town of Cloverdale, its Council, the Cloverdale Police Department and its Chief, employees, agents and servants harmless from any and all liability to me for death, personal injury, or property damage, whether proximate or remote, sustained while I ride-along and observe law enforcement activity.

Signature of Rider (regardless of age) \_\_\_\_\_ Date Signed \_\_\_\_\_

**PARENTAL CONSENT**

I, the undersigned, have read and understand the reverse side of this form and, being the parent(s) or legal guardian of \_\_\_\_\_, a minor under the age of eighteen, ask that the Cloverdale Police grant permission for the above-mentioned minor to ride on the date of \_\_\_/\_\_\_/\_\_\_, in a Police Department motor vehicle and observe law enforcement activity. I \_\_\_\_\_

authorize the Cloverdale Police Department to conduct a police records check of the minor. I realize and appreciate the nature of law enforcement work, and know that the minor might encounter violence, uncertainty, danger and criminality during a ride-along. I understand that the minor may encounter situations during the ride-along that expose the minor to a risk of death, physical harm or injury, including, but not limited to, motor vehicle accidents. I freely and voluntarily accept these risks.

I further understand that he/she will be a guest passenger in the Police vehicle in which he/she rides. I have not offered any payment to the Police Department or any of its employees for the opportunity for the above named minor to ride in a police vehicle and observe law enforcement activity.

In order that the minor may gain the educational benefits of riding-along, I further agree to hold the Town of Cloverdale, its Council, the Cloverdale Police Police and its Chief, employees, agents and servants harmless from any and all liability to the above-named minor and to me for death, personal injury or property damage, whether proximate or remote, sustained while he/she rides-along and observes law enforcement activity.

Signature of Parent/Guardian \_\_\_\_\_ Date Signed \_\_\_\_\_

Witnessed by Officer \_\_\_\_\_