



CITY OF SANDUSKY POLICE DEPARTMENT - ERIE COUNTY, OHIO

CITIZEN RIDE-ALONG REQUEST

I would like to ride along on _____,
DATE

accompanying Officer _____ for the following
reason:

I have read and signed the release form and I understand the provisions.

NAME _____

ADDRESS: _____

TELEPHONE #: _____

BEST TIME / DAY TO BE CONTACTED: _____

DATE

SIGNATURE

PARENT/GUARDIAN (if rider is juvenile)

FROM: Chief Jared Oliver _____

TO: Officer _____

SUBJECT: AUTHORIZATION

REQUEST IS APPROVED DISAPPROVED

OBSERVER AUTHORIZED TO RIDE _____ ON _____
HOURS DATE

WITH OFFICER _____

Ride along was completed on: _____

RETURN THIS FORM TO CHIEF OLIVER UPON COMPLETION OF RIDE ALONG

RELEASE AND WAIVER

I, _____, on my own behalf and on behalf of my heirs, next of kin, executors, administrators, estate, agents and assigns, and representatives of any nature whatsoever, for and in consideration of the authorization and permission to accompany officers or any officer of the Sandusky Police Department during the course of their or his duties, which has been granted to me at my voluntary request, after having been fully advised of the potential hazards of such activity or activities, do hereby WAIVE AND RELEASE all demands, damages, actions, causes of action, suits and claims of any nature whatsoever, whether in law or in equity, that I or my heirs, next of kin, executors, administrators, estate, agents and assigns, and representatives of any nature whatsoever might otherwise have against the City, the Sandusky Police Department, and each and every officer, official, member, employee, agent and attorney thereof and therefore, and his or her heirs, next of kin, executors, administrators, and estate, on account or my death or injuries, both to person and to property, whether foreseeable or not, which may occur, directly or indirectly, or develop at any time in the future as a result of my activities or association with the Sandusky Police Department, whether in a police vehicle, in the police station, or otherwise in association with the Sandusky Police Department and officers and officials thereof in any manner whatsoever.

It is expressly agreed and understood that this WAIVER AND RELEASE shall apply for the express purpose of precluding forever all claims, suits, demands, damages, and causes of action that I or my heirs, nest of kin, executors, administrators, estate, agents and assigns and representative of any nature whatsoever might otherwise assert against any of the aforesaid parties as a result of my association and activities with the Sandusky Police Department during my ride along.

I hereby declare that the terms of this WAIVER AND RELEASE have been fully read and understood by me, and freely and voluntarily entered into and accepted by me.

In further consideration of the aforesaid authorization and permission granted to me to accompany an officer or officers of the Sandusky Police Department at my own request, I hereby promise and agree to **FULLY COMPLY** with all instructions given to me for the purpose of protecting my personal safety and that of my property.

Signed this _____ day of _____, 20_____.

Signature

Parent / Guardian (If Signer is a Juvenile)

Witness