



GARRETTSVILLE POLICE DEPARTMENT

Ride Along Application, Guidelines, and Waiver (Page 1 of 2)

Welcome to the Garrettsville Police Department (GPD) Ride Along Program! We appreciate your interest in learning more about our department, and hope your experience will be both enjoyable and educational.

Although most of your time with us will likely involve routine police work, there is always the possibility of danger.

Riding on patrol, in a marked police vehicle with a uniformed police officer, can place you in the same unexpected danger as the officer in the patrol car with you. For this reason, we have established the following guidelines, which must be followed at all times:

1. No one under the age of sixteen (16) is permitted to ride along with GPD without the specific authorization of the Chief of Police. GPD also reserves the right to decline any request to ride along, regardless of age.
2. Anyone seeking to ride with GPD must present a valid, state-issued photo ID at the time of the ride along, and must read and sign the Ride Along Waiver on page 2 of this document. All riders are subject to a wants and warrants check prior to riding along, and your signature below acknowledges awareness of this check.
3. Ride Alongs are typically limited to four (4) hours in duration. While the department will attempt to accommodate a rider's preference as to the officer with whom s/he rides, the department reserves the right to assign riders to officers as they see fit. Probationary officers may not have riders.
4. During the ride along, conduct yourself as an observer. You must not become physically or verbally involved in any incident.
5. Feel free to ask questions of the officer, but do not do so when s/he is involved in an investigation or any other matter wherein the officer's full attention is required.
6. The officer may explain or demonstrate the uses for the various items of equipment inside the vehicle; however, you must not touch any of the equipment.
7. Remember that while you are riding along, the officer is concentrating on a number of tasks that require him/her to be fully alert. If the officer at any time asks you to stop speaking, please do so without question.
8. You may expect to go wherever the officer goes. If the officer is involved in a situation involving undue danger, you may be asked by the officer to remain in the patrol car to ensure your own safety. It is possible, but unlikely, that the officer may ask you to remain behind in a safe place while the officer responds to an extremely dangerous situation.
9. Posting to social media during a ride along is prohibited, unless explicitly approved in advance.
10. Seat belt use is required in department vehicles at all times a vehicle is in motion.

RIDER APPLICATION AND ACKNOWLEDGMENT OF WARRANT CHECK

Printed Name of Rider Permanent

Address of Rider

Signature of Rider

Operator's License Number / State of Issue

Date Signed

Rider's Date of Birth



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_____ Printed Name of Rider _____ Date and Time of Ride	Supervisor Approval and Comments (GPD use only):
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RIDE ALONG ASSUMPTION OF RISK AND WAIVER

I hereby acknowledge that accompanying a Garrettsville police officer may subject me to the inherent risks of police patrolling, including high-speed vehicle activity, unexpected encounters with violent individuals, and other dangerous situations. I voluntarily assume all such risks. Further, on behalf of myself and my heirs and assigns, I release Village of Garrettsville and its trustees, officers, employees and agents (“Releasees”) from all claims and liability arising out of the acts and omissions of Releasees during the Ride Along Program, including ordinary negligence, that cause injury, death, disability or property loss or damage. **THE UNDERSIGNED (1) HAS READ THIS DOCUMENT AND UNDERSTANDS THAT IT IS A RELEASE OF ALL CLAIMS; (2) ASSUMES ALL RISKS INHERENT IN THIS ACTIVITY; AND (3) HAS EXECUTED THIS RELEASE VOLUNTARILY.**

<input type="checkbox"/> Rider is 18 years of age or older	<input type="checkbox"/> Rider is less than 18 years of age
_____ Signature of Rider	_____ Signature of Rider’s Parent/Guardian
_____ Date Signed	_____ Printed Name of Signer
_____ Street Address	_____ Relationship of Signer to Rider
_____ City, State and Zip Code	_____ Date Signed
_____ Signature of Witnessing Officer	_____ Street Address
	_____ City, State, and ZIP Code
	_____ Signature of Witnessing Officer

EMERGENCY INFORMATION

_____ Emergency Contact Person _____ Address _____ Telephone Number	Allergies, Medication, and Other Medical History of Rider:
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