

YUMA COUNTY SHERIFF



Sheriff Todd Combs

RIDE-ALONG APPLICATION & WAIVER FORM

AGREEMENT ASSUMING RISK ON INJURY, DAMAGE, OR DEATH WAIVER AND RELEASE OF CLAIMS; AND AGREEMENT NOT TO SUE

Whereas the undersigned, not being a sworn member, employee or agent of the Yuma County Sheriff's Office, has made a voluntary request for permission to ride as a guest or observer in a law enforcement vehicle at a time when such vehicle is operated and manned by members of the Yuma County Sheriff's Office and has further requested permission to accompany a member or members of said law enforcement agency during the active performance of their official duties as peace officers: and

Now, therefore, be it understood that the undersigned hereby agrees that THE WORK AND ACTIVITIES OF THE SHERIFF'S OFFICE ARE INHERENTLY DANGEROUS INVOLVING SUBSTANTIAL RISKS including the risk of death; personal injury, and/or property damage; such risks may be generated by individuals breaking, or suspected of breaking the law; by the apprehension, or attempted apprehension, of such individuals; by motor vehicles driven by peace officers or by others; or may occur in a truly limitless variety of ways; AND THAT THE UNDERSIGNED WILL BE EXPOSED TO SUCH RISKS BY ACCOMPANYING, OR PARTICIPATING IN, THE RIDE-ALONG.

Further, knowing all these risks, the undersigned nevertheless hereby agrees to voluntarily assume all risks, both known and unknown and to release and hold harmless all of the persons and entities named herein who, through negligence or intentional conduct, might otherwise be liable for damages.

Now, therefore, be it understood that the undersigned hereby agrees that the County of Yuma, and any city within the county which contracts with the County of Yuma for law enforcement services, the Yuma County Sheriff's Office, the driver or owner of any automobile owned or operated by, or in the service of the County of Yuma or contract cities, their sureties, and each of them, shall not be held liable or responsible under any circumstances whatsoever by the undersigned, his or her estate, or heirs, for any death, injury, expense or loss to the person or property of the undersigned, incurred while riding as a guest or observer in any Yuma County Sheriff's Office vehicle or while accompanying a member of said agency during the active performance of his/her official duties as a peace officer. The undersigned agrees not to sue any of the above for any possible death, injury, expense, or loss.

I also agree, to the extent that I may have access to confidential information of the Sheriff's Office during the course of ride-along activities, to comply with all applicable statutes of the United States, the State of Colorado and all applicable policies and rules and regulations of the Sheriff's Office,

310 S. ASH, SUITE G - WRAY, CO 80758



and

to protect the confidentiality of any such information accordingly. I agree that confidential information will not be disclosed to third parties or used personally for any purpose.

I agree that the Yuma County Sheriff's Office may photograph, televise, and videotape the undersigned in conjunction with activities associated with the Sheriff's Office and the ride-along program, for program image advertising in a non-commercial use, including, but not limited to promotion, the broadcast and/or news coverage of the Yuma County Sheriff's Office ride-along activities.

THE UNDERSIGNED: HAS READ THIS RELEASE AND FULLY UNDERSTANDS ITS CONTENTS; IS AWARE THAT THIS RELEASE IS A WAIVER OF LIABILITY AND HAS SIGNED THIS RELEASE VOLUNTARILY. NOTE: THE SIGNATURE OF A PARENT OR GUARDIAN, AND SPECIAL APPROVAL BY THE SHERRIF OR UNDERSHERIFF IS REQUIRED FOR THOSE GUESTS OR **OBSERVERS UNDER THE AGE OF EIGHTEEN (18) YEARS.**

NAME:

SIGNATURE: _____ DATE: _____

| PARENT/GU | JARDIAN: |
|-------------|----------|
| I ANLINI/OC | JANDIAN. |





YUMA COUNTY SHERIFF



Sheriff Todd Combs

RIDE-ALONG PROGRAM RULES and REGULATIONS

(Bring this form with you on your ride-along)

The Ride-Along program provides the public with an opportunity to ride with a peace officer while he performs his regular duties. The program is designed to enhance your understanding of law enforcement. The following rules and regulations are designed to maintain the integrity and positive nature of this program.

- 1. All observers shall sign a release of liability, and file it with the Yuma County Sheriff's Office.
- 2. Observers under 18 years of age must have a parent or guardian sign the release of liability in the presence of a Yuma County Sheriff's Office employee and obtain special approval from the Sheriff or Undersheriff.
- 3. The Yuma County Sheriff's Office may deny approval to participate in the ride-along program for any reason. Each application is reviewed based upon a totality of the circumstances, and great consideration is given in an effort to approve each application if possible. If you are denied for a ride-along, you may appeal the decision in writing directly to the Sheriff. Some reasons that may lead to a denial include, but are not limited to the following:
 - Prior criminal history including:
 - Any felony arrests or convictions
 - Misdemeanor arrests or convictions in the previous 3 years
 - Having been in the custody of the Yuma County Jail within the last (1) year
 - Pending criminal action
 - Recent law enforcement contacts
- 4. Observers must wear appropriate attire. Suits, sport coats, sweaters, sport shirts, blouses, slacks, or dress pants are acceptable. Shoes must enclose the entire feet. No open toed shoes, shorts, tank tops, t-shirts, or ripped or torn jeans are allowed. Be prepared for inclement weather. Your ride-along may be cancelled if you are inappropriately dressed.
- 5. All rides are scheduled for a full shift. You may request prior approval for a shorter time period. You will begin your ride at the Sheriff's Office or prior arranged location, and you will be returned there at the end of the scheduled ride. When in a vehicle, you must wear a seatbelt and shoulder belt at all times.



- 6. Questions about procedures are welcome. However, they must be asked at the appropriate time. Observers should be careful not to interfere with the deputy at any time.
- 7. The observer is responsible to pay for his/her own meals.
- 8. Observers shall obtain authorization from the deputy prior to talking with prisoners, suspects, witnesses or other parties contacted on official business. Observers shall not participate in police activities, unless directed to do so by the deputy.
- 9. Conduct must follow professional standards of the Sheriff's Office. Horseplay, flirtatious conduct or any unprofessional conduct will cause immediate termination of the ride along.
- 10. An observer may end his/her ride at any time simply by notifying the deputy.
- 11. If the deputy feels the performance of his duties is being impaired in any manner by the actions of the observer, the deputy has the authority to discontinue the ride-along.

I have read the above rules/regulations. I understand and agree to abide by them.

Date



P-970.332.4805 F-970.332.5820



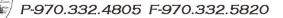
YUMA COUNTY SHERIFF

Sheriff Todd Combs



<u>RIDE-ALONG APPLICATION</u>

| Name of Rider | | | | |
|--------------------------|---|-------------------------|--------------------|--|
| (Please Print) L | AST | FIRST | MI | |
| Other Names/Aliases | | DOB | | |
| Iome Address | | | | |
| Home Phone | Occup | ation: | | |
| Driver's License # and S | state: | | list school/grade) | |
| Date of Ride-Along (Wri | of Ride-Along (Write NA if no preference) | | Shift Requested | |
| Deputy Requested (Write | NA if no preference) | Relations | Relationship | |
| Reason for ride-along re | quest | | | |
| | | | | |
| In Case of Emergence | y Notify (To be completed by | (applicant) | | |
| | | Phone | | |
| LAST | FIRST | MI | | |
| Address | | | | |
| Family Doctor or Spacio | 1 Medical Services Reques | sted by Rider if needed | | |
| anny Doctor of Specia | i medical sel mees neequee | 2 | | |



| Records Check (To be completed by Sheriff's Office staff) | | | | |
|---|--------------------------------------|-------------------|------|--|
| DMV | Warrants | Records | | |
| Date Completed | Completed by | | | |
| Approval / Assignmen | It (To be completed by Sherif | f's Office staff) | | |
| APPRO | OVED | DENIED | | |
| Reason (if denied) | | | | |
| Reviewed by Name | | Rank | Date | |
| Assigned to Deputy | | Shift | Date | |
| Ride-Along Completed _ | Deputy's Signature | | | |

