

# FOX VALLEY METRO POLICE DEPARTMENT RIDE ALONG REQUEST FORM

Full Name:		DOB:		
(First/MI/L	ast)			
Address:	Ema	Email:		
City: State	e: Zip:	Phone: ()		
Occupation/Profession:				
Reason for Riding-Along:				
Date Requested to Ride:		cipating Officer:		
Have you been on a Ride-Along with	our department within the	past 60-days?		
If yes, Date:	_ Shift:	Officer:		
Riders Comments:				
X				
Rider Signature		Date		
Operations Coordinator or Supe	rvisor Approval	Date		

\*PLEASE RETURN THE COMPLETED FORM TO <u>LIEUTENANTS@FVMPD.ORG</u> YOUR RIDE-ALONG REQUEST WILL NOT BE PROCESSED UNTIL THEN\*



# FOX VALLEY METRO POLICE DEPARTMENT RIDE-ALONG RULES OF CONDUCT

#### **RULES OF CONDUCT**

- 1. **Punctuality:** Participants are requested to arrive for the ride-along 10 minutes prior to the start of the scheduled time period.
- 2. **Suitable Attire:** an approved ride-along is required to be suitably dressed in a collared shirt, blouse, or jacket, slacks, and closed toe shoes. Sandals, T-shirt, tank tops, shorts, and ripped or torn blue jeans are not permitted. Appropriate headwear is allowed.
- 3. **Firearms and Weapons:** Ride-along (with the exception of pre-approved sworn/certified law enforcement officers who are current in their qualification status) are prohibited from possessing weapons of any kind during the ride-along.
- 4. **Recording Equipment and Cell Phones:** Recording (audio or visual) and photographs of any kind are prohibited during the ride-along. A ride-along may have a cell phone with them; however, they will be required to have the phone shut OFF and out of sight for the duration of the ride-along.
- 5. **Observe:** Participants shall remain in the police vehicle at all times, unless directed otherwise by the police officer. Ride-Along participants shall not become involved, or participate, in any police investigation. The purpose of the ride-along is to allow the participant to observe.
- 6. **Confidentiality:** A ride-along is located inside the police vehicle, in close proximity to the mobile data computer, which contains access to highly sensitive criminal justice information. As such, a ride-along shall not disclose ANY confidential information of which they become aware while participating in the ride-along.

Hopefully you will find your ride-along experience both educational and rewarding.

### My signature confirms I have read and understand the rules of conduct.

Signature:		Date:	
	(Ride-along participant)		

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# FOX VALLEY METRO POLICE DEPARTMENT RIDE-ALONG WAIVER

### AGREEMENT ASSUMING RISK OF INJURY OR DAMAGE AND WAIVER AND RELEASE OF CLAIMS AND INDEMNITY AGREEMENT

l,	_ (please print your name), not being a member of the Fox Valley Metro
Police Department (Department) and	d having made a voluntary request to ride as a guest in a vehicle assigned
to the Department to accompany a r	member or members of said Department during the performance of their
duties, do hereby agree to the follov	ving.

The "duties" of the Department and any member or members of the Department are defined as all activities, incidents, encounters, or confrontations which may occur while I am accompanying a member or members of the Department.

The Department is willing to allow me to ride as a guest in a vehicle assigned to the Department and to accompany a member or members of the Department during the performance of their duties on the following conditions:

- 1. That I am aware that the work and duties of the Department are inherently dangerous and that I may be subjected to the risk of death or personal injury or damage to my property by accompanying a member or members of the Department during the performance of their duties and that I freely, voluntarily and with such knowledge assume the risk of death, personal injury, or property damage from or in any way connected to my accompanying member or members of the Department during the performance of their duties, including, but not limited to any claims, damages or injuries arising from or in connection with riding, transporting, or traveling in any vehicle assigned to the Department, the use of weapons by a member or members of the Department or any person or persons, unlawful acts or forcible resistance by any person or persons.
- 2. The Fox Valley Metro Police Department, their administrators, employees, agents, or assigns, shall not be responsible or liable for any injury or damages, loss or expense to either me or my property incurred while riding in any vehicle assigned to the Department or while accompanying any member or members of the Department during the performance of their duties resulting from any negligence or omission on the part of any member of the Department or any other person or persons.
- 3. I agree to indemnify and hold harmless the Fox Valley Metro Police Department, their administrators, employees, agents, or assigns, against any and all claims, demands, damages, actions, causes of actions, or suits of any kind or nature whatsoever on a count of any and all injuries and damages, known and unknown, both to person and property, which may result or may in the future develop from my accompanying a member or members of the Department during the performance of their duties.

- 4. I agree to indemnify the Fox Valley Metro Police Department, their administrators, employees, agents, or assigns, against any and all claims, demands, damages, actions, causes of actions, or suits of any kind or nature whatsoever on a count of any kind and all injuries and damages, known and unknown, both to person and property, which may result or may in the future develop as a result of any acts or omissions to act which I may commit while accompanying any member or members of the Department.
- 5. The Department may terminate this agreement at any time without notice or warning for valid reasons, which will be at the sole discretion of the accompanying Department officer or his or her supervisor.
- 6. That I will obey all instructions and directions from any Department officer. I understand that any failure on my behalf to follow the instructions or directions will be grounds for immediate termination of this agreement.

NOW, THEREFORE, in consideration of the permission given to me to ride in a vehicle assigned to the Department and to accompany a member or members of said Department during the performance of their duties, I do hereby agree to all of the above conditions and hereby release and forever discharge the Fox Valley Metro Police Department, its administrators, agents, employees, and assigns from any and all claims, damages, demands, actions, causes of actions, or suits of any kind or nature whatsoever on account of any and all injuries and damages, known and unknown, both to person and property which may result now or in the future may develop as a result of accompanying a member or members of the Department during the performance of their duties.

### **CAUTION!! READ BEFORE SIGNING!**

Signature of Ride-Along	Date and Time	
Signature of Parent or Legal Guardian	Date and Time	
Signature of Witness	Date and Time	
Operations Coordinator or Supervisor's Approval	Date and Time	_

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