



Huerfano County Sheriff's Office
 500 S. Albert Walsenburg, CO 81089
 Phone:(719) 738-1600 Fax(719)738-3676



RIDE-ALONG REQUEST APPLICATION

ALL APPLICANTS MUST BE AT LEAST 18 YEARS OF AGE. A VALID PHOTO ID IS REQUIRED WHEN SUBMITTING THIS APPLICATION. APPLICATIONS AND RELEASE FORMS MUST BE TURNED IN TO THE SHERIFF'S OFFICE RECORDS DIVISION LOCATED AT 500 S. ALBERT ST. WALSENBURG CO 81089 MONDAY-FRIDAY, 8AM-5PM. APPLICANTS MUST GIVE AT LEAST 5 DAYS NOTICE OF THEIR REQUESTED RIDE ALONG DATE.

NAME: FIRST: _____ MIDDLE: _____ LAST: _____

ADDRESS: _____

DATE OF BIRTH: ____/____/____ SOCIAL SECURITY NUMBER: ____/____/____

TELEPHONE NUMBERS: HOME: _____ CELL: _____

EMERGENCY CONTACT NAME: _____ NUMBER: _____

DATE DESIRED TO RIDE: ____/____/____ (MUST GIVE AT LEAST 5 DAYS NOTICE)

TIME DESIRED (MAX 4 HOURS): START TIME: _____ END TIME: _____ AM / PM

(Must be between 8am and 11pm. Times are not guaranteed and subject to change by agency)

REASON FOR REQUEST:

I understand that before I am permitted to participate in the program, a criminal background check to include a NCIC (National Criminal Information Center) inquiry will be conducted. By signing below, I authorize the Huerfano County Sheriff's Office to conduct an NCIC inquiry. I understand that I am under the direct supervision of the officer with whom I am riding and in no way will hinder said officer from the performance of his/her duties. I agree to adhere to all departmental policies, rules and regulations, and understand that the maximum allowable riding time is four (4) hours. I understand that I must sign the Release and Indemnity Agreement Form prior to beginning the ride-along. I understand that I must sign and abide by the Rules of Conduct and Information Sheet prior to beginning my assigned ride along. I hereby agree to release and hold Huerfano County, its Sheriff, Deputies, and all others connected with Huerfano County, free and harmless from any and all liability and claims for damages by reason of any injury or harm that might arise out of my participation in the ride-along program.

SIGNATURE: _____ DATE: _____

Criminal Record check conducted by: _____ Circle One: No Record Record
 Attached

RIDE ALONG APPROVED: _____ RIDE ALONG DENIED: _____

RIDE APPROVED/DENIED BY: _____ DATE: _____

Schedule Ride Along Date: _____ Time: _____ Deputy: _____

RIDE-ALONG PROGRAM PARTICIPANT

Participant Copy

RULES OF CONDUCT AND INFORMATION SHEET

The purpose of the Citizen Ride-Along Program is to be an educational program. It is designed to give citizens an up close view into the daily operations of the police department and the law enforcement profession. Citizens are encouraged to ask officers questions about the department and the profession. Citizens should refrain from discussing potentially adversarial topics with officers. Officers may end the ride-along at any point if they experience any difficulty with the ride-along participant.

1. Riders must be at least 18 years of age. Riders are not permitted to carry anything on your person, which could be construed to be a weapon, including pocket knives.
2. Anyone wishing to participate in this program must complete a ride along application and present valid photo identification for each ride along request. Current, Certified Law Enforcement Officers are exempt from the application, but must sign a Release and Indemnity Agreement each time they ride.
3. An applicant who has a felony record will be excluded from the program. An applicant with a misdemeanor record involving a crime of moral turpitude or dishonesty may be excluded from the participation in the program.
4. Once approved, the participant will be notified of the date and time of their ride along. If a participant is not available for the assigned time, he or she can reschedule to an alternate date.
5. Participants should arrive at the Department at least 15 minutes prior to their scheduled ride along. The Department reserves the right to cancel the ride along rather than delay the officer from going on duty in the event that the ride along participant is late.
6. Riders should be dressed in comfortable, business casual clothing. (Pants and collared type shirt/blouse). No dresses or shorts. **Closed toed shoes must be worn.** The Department reserves the right to judge the reasonableness of dress and appearance.
7. Riders are instructed not to interfere in any way with the actions of the officer while engaged in official duty. Riders shall not play an active role in the police function. They must act as an observer unless otherwise directed by their host officer in an extreme emergency situation. (i.e. officer shot in the line of duty)
8. Riders shall not be allowed to operate any police equipment unless directed to do so by an officer in an emergency situation.
9. There may be occasions when you may be required to leave the patrol unit while the officer answers a potentially dangerous call. You should be prepared to be dropped off at a public place and to be picked up later in such a case.
10. Riders are required to remain in the patrol unit while the officer is out on a call. On certain types of calls, the officer may permit you to observe if he/she feels the circumstances warrant it. No attempt should be made to assist the officer unless he/she asks for help or under extreme emergency situations.

A. Riders shall not enter private property without the express permission of the homeowner/occupant.

11. Remember, should you be a witness to certain events, there is a possibility that you may be subpoenaed into court as the a witness.
12. Riders shall not speak to victims, witnesses, prisoners or other persons associated with the police event being investigated. Riders shall direct the person to a deputy if spoken to.
13. Riders, including members of the media shall not bring cameras or any recording devices without the express written permission of the Sheriff. Riders should not use cell phones during the ride along unless it is an emergency situation.
14. Riders shall follow the instructions of the host officer at all times during the ride along.
15. Riders shall only be allowed to participate for **4 hours, 2 times per year**. The Sheriff may grant exceptions to this rule.
16. Riders may be excluded from participating in the program at the discretion of the Sheriff without notification of the reason.

DISCLAIMER: The preceding rules are designed to make your experience during the ride-along as safe and enjoyable as possible. The Huerfano County Sheriff's Office cannot guarantee your safety during the ride-along period. By following the preceding rules, the risks to your safety are reduced.

We hope that you enjoy the Huerfano County Sheriff's Office Citizen Ride-Along Program!

HUERFANO COUNTY SHERIFF'S OFFICE RIDE-ALONG PROGRAM
VOLUNTARY ASSUMPTION OF RISK AND RELEASE OF LIABILITY AGREEMENT

I, _____, HEREBY ACKNOWLEDGE that I have voluntarily applied to participate in the Huerfano County Sheriff's Office Ride-Along Program. I have read, understand, and agree to abide by the Ride-Along Rules and Regulations regarding my required conduct and responsibilities with respect to the program. Initial: _____

I AM AWARE THAT POLICE WORK IS INHERENTLY DANGEROUS due to many factors, including the possibility of high speed chases, armed suspects, and potential emotional trauma. I AM VOLUNTARILY PARTICIPATING IN THIS ACTIVITY WITH KNOWLEDGE OF THE DANGER INVOLVED AND HEREBY ASSUME FULL RESPONSIBILITY FOR, AND RISK OF, BODILY INJURY, DEATH OR PROPERTY DAMAGE due to the negligence of the County or otherwise resulting from any aspect of my voluntary participation in the Huerfano County Sheriff's Office Ride-Along Program. I intend for this agreement to be binding on my heirs, personal representatives, next of kin, spouse and assigns. Initial: _____

I HEREBY WAIVE, RELEASE AND DISCHARGE FROM ALL LIABILITY HUERFANO COUNTY, its elected and appointed officials, officers, agents and employees from any and all claims, damages, causes of action, demands in law or in equity, resulting from the negligence of Huerfano County, its elected and appointed officials, officers, agents and employees, or otherwise resulting from any aspect of my voluntary participation in the Huerfano County Sheriff's Office Ride-Along Program. I intend for this agreement to be binding on my heirs, personal representatives, next of kin, spouse and assigns. Initial: _____

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND THAT IT IS AN AGREEMENT TO ASSUME ALL RISKS AND TO RELEASE THE CITY FROM ALL LIABILITY RESULTING FROM MY PARTICIPATION IN THE RIDE-ALONG PROGRAM AND SIGN IT OF MY OWN FREE WILL.

Applicant Signature: _____ Date: _____

Witness Signature: _____ Date: _____

JUVENILE RELEASE (if applicant is under 18 years of age.)

To be signed by the parent or guardian.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND THAT IT IS AN AGREEMENT FOR MY CHILD OR TRUSTEE TO ASSUME ALL RISKS AND TO RELEASE HUERFANO COUNTY FROM ALL LIABILITY RESULTING FROM MY CHILD'S OR TRUSTEE'S PARTICIPATION IN THE RIDE-ALONG PROGRAM. I HAVE CAREFULLY EXPLAINED THE RELEASE, ITS SIGNIFICANCE AND THE ASSUMPTION OF RISK TO MY MINOR CHILD OR TRUSTEE. BY SIGNING BELOW, I HEREBY GIVE MY CHILD PERMISSION TO PARTICIPATE IN THE PROGRAM AND AGREE TO BE BOUND TO THE TERMS AND CONDITIONS OUTLINED HEREIN.

Parent or Guardian Signature: _____ Date: _____

Witness Signature: _____ Date: _____