



RIDE ALONG AGREEMENT -LANE COUNTY SHERIFF'S OFFICE

PLEASE PRINT CLEARLY AND LEGIBLY. ALL QUESTIONS MUST BE ANSWERED.

NAME: _____ TODAY'S DATE: _____
ADDRESS: _____ TELEPHONE: _____
SOCIAL SECURITY #: _____ BIRTHDATE: _____ ODL: _____

LIST ANY CURENT MEDICAL PROBLEMS FOR WHICH YOU ARE BEING TREATED, OR ANYTHING WHICH MIGHT INTERFERE WITH ENTERING AND EXITING A PATROL CAR. _____

LIST TWO PEOPLE WHO CAN BE NOTIFIED IN CASE OF AN EMERGENCY:
NAME: _____ RELATIONSHIP: _____ PHONE: _____
NAME: _____ RELATIONSHIP: _____ PHONE: _____

LIST THE NAME AND NUMBER OF YOUR PHYSICIAN: _____

____ I AM SCHEDULED TO RIDE WITH DEPUTY _____ ON _____ AT _____
____ I AM NOT YET SCHEDULED. MY AVAILABLE DAYS AND TIMES ARE: _____

STATEMENT OF PURPOSE FOR OBSERVER RIDE: _____

IN ORDER TO ESTABLISH SECURITY CLEARANCE, THE LANE COUNTY SHERIFF'S OFFICE REQUIRES A CRIMINAL BACKGROUND CHECK FOR ALL CIVILIAN RIDE ALONGS. YOUR SIGNATURE INDICATES YOUR KNOWLEDGE AND CONSENT FOR THIS BACKGROUND CHECK, AND ALSO ACKNOWLEDGES THAT YOU AGREE TO BEHAVE AND DRESS IN A CLEAN AND APPROPRIATE MANNER AND THAT YOU AGREE TO KEEP CONFIDENTIAL ANY PRIVILEGED/CONFIDENTIAL INFORMATION TO WHICH YOU ARE EXPOSED.

RIDER SIGNATURE

PARENT/GUARDIAN IF RIDER IS UNDER 18

LAW ENFORCEMENT OFFICERS, COMPLETE THIS SECTION:

I ATTEST TO THE FOLLOWING:

I am employed by: _____ (agency). I am a current certified law enforcement officer in good standing. I have my police badge and identification on me. I am carrying my agency's issued handgun and ammunition, or authorized backup weapon and ammunition, and am qualified by my agency to use the weapon. I have read the Sheriff's Office Use of Force General Order 1.12 and agree to comply with it.

NAME: _____ DATE: _____

FOR OFFICIAL USE ONLY. THE OFFICER/SUPERVISOR PORTION MUST BE COMPLETE PRIOR TO RIDE
BACKGROUND COMPLETED BY: _____ APPROVED/DENIED ON: _____
DATE ASSIGNED: _____ TIME ASSIGNED: _____ OFFICER ASSIGNED: _____
SUPERVISOR'S SIGNATURE: _____ DATE: _____

RELEASE AND AGREEMENT OF INDEMNIFICATION

This document is a Release and Agreement of Indemnification entered into this _____ day of _____ (month), _____ (year), between _____ (your name), hereinafter referred to as the Undersigned, and the Lane County Sheriff's Office, hereinafter referred to as LCSO.

RECITALS

LCSO is willing to allow the Undersigned the opportunity to ride with and accompany a deputy while in performance of the deputy's duties, such ride being for the purpose of observation.

The Undersigned knows, understands and appreciates the inherent risks to himself/herself in riding with and accompanying a deputy, and the Undersigned does not wish to hold LCSO, the Sheriff, the County, deputies, employees, agents, representatives, or other law enforcement or County personnel responsible for any harm or injury.

The Undersigned wishes to deliberately and voluntarily expose himself/herself to all inherent risks and to personally assume the risk of any injuries or damage arising out of or occurring while preparing for, departing from, riding with or accompanying a deputy in a County vehicle while in the performance of the deputy's duties.

NOW, THEREFORE, the County agrees to make available to the Undersigned an opportunity to ride as an observer in a County vehicle with a deputy of the Lane County Sheriff's Office.

The Undersigned, in consideration of the benefit to him/her, releases from any and all liability and agrees to indemnify and to save and hold harmless Lane County, the Sheriff, all deputies, LCSO, and all agents and personnel of Lane County, from any and all liability, cost, expense, claim, or damage which might otherwise be claimed by the Undersigned or his/her heirs, successors, or assigns, on account of any injury to the person or property of the Undersigned of whatsoever kind arising directly or indirectly out of this observation ride, including but not limited to:

- 1) Automobile accident, no matter what driver may be at fault;
- 2) Any injuries arising from any fight, brawl, altercation, riot or other incidents;
- 3) Any other injuries which may be sustained by the Undersigned at any time while riding with or accompanying a deputy.

It is not the intention of the Undersigned to, and the Undersigned does not, hereby release any other person who inflicts any injury to the person or property of the Undersigned while the Undersigned is participating as an observer.

The Undersigned further states that he/she has carefully read the foregoing Release Agreement, and understands the contents thereof and signs this Release as his/her free act.

Rider Signature

Lane County

Parent/Guardian signature if person is under 18