



RIDE-ALONG WAIVER FOR PERSONAL INJURY

AGREEMENT & RELEASE OF LIABILITY

I, _____, hereby acknowledge that I have voluntarily requested to ride along as a passenger/observer in an Irvine Police vehicle during a tour of duty with a sworn police officer and/or non-sworn employee.

I AM AWARE THAT POLICE WORK IS A DANGEROUS OCCUPATION AND THAT RIDING IN A POLICE UNIT DURING AN OFFICER'S TOUR OF DUTY RESPONDING TO CALLS FOR SERVICE, E.G. DOMESTIC VIOLENCE, ROBBERIES, BURGLARIES, STOPPING INDIVIDUALS OR VEHICLES ON THE STREET FOR INVESTIGATION OF CRIMES ARE HAZARDOUS ACTIVITIES. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH THE KNOWLEDGE AND APPRECIATION OF THE DANGERS INVOLVED, AMONG WHICH COULD INCLUDE BEING SHOT, STRUCK BY A VEHICLE, EXPOSED TO HAZARDOUS MATERIALS, INJURED IN A TRAFFIC COLLISION, OR HIT BY A THROWN OBJECT, AND HEREBY AGREE TO ACCEPT AND ASSUME THE RISK OF PROPERTY DAMAGE, INJURY OR DEATH.

(INITIAL)

AS LAWFUL CONSIDERATION for being allowed to ride along with a police officer during his/her tour of duty, I agree that I, my heirs, distributees, guardians, legal representative, next of kin, spouse and assigns **will not** make a claim against, sue, attach the property of, or prosecute the City of Irvine or its employees, for injury or death to my person or damage to my property resulting from passive or active negligence, or intentional acts, however caused, by any of its employees or other persons such as potential suspects or drivers of other vehicles, as a result of my participation as an observer or presence in a police unit, police station jail, or on the property of another while accompanying police officers engaged in law enforcement related activities.

In addition, I hereby **RELEASE AND DISCHARGE** the City of Irvine and its employees from all actions, claims or demands I, my heirs, distributees, guardians, legal representatives, next of kin, spouse or assigns now have or may in the future have for injury or death to my person or damage to my property resulting from my participation in observing and accompanying a law enforcement officer / employee during a tour of duty.

(INITIAL)

Further, I hereby agree to compensate or reimburse the City of Irvine and its employees for any claims brought against it for property damage or personal injury or death which arises as a result of my passive or active negligence or other act while participating in any of the above named activities, including attorneys' fees and other costs of defense.

"In Partnership with the Community"

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I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A CONTRACT FOR THE RELEASE OF LIABILITY BETWEEN MYSELF AND THE CITY OF IRVINE AND ITS EMPLOYEES, AND HAVE SIGNED IT OF MY OWN FREE WILL.

_____ (INITIAL OF RIDE ALONG/RELEASOR)

TO BE FILLED OUT BY THE RIDE ALONG/RELEASOR

PRINT RELEASOR NAME* _____ AGENCY AFFILIATION _____

ADDRESS* _____ CITY _____ STATE _____ ZIP _____

DRIVER'S LICENSE NUMBER* _____ STATE _____ DATE OF BIRTH* _____ PHONE* _____

Have you ever been arrested? NO YES (If YES, explain below)

SIGNATURE* _____ DATE _____

IF UNDER 18 YEARS OF AGE, A SIGNATURE OF A PARENT OR GUARDIAN IS REQUIRED.

PARENT NAME* _____ PARENT SIGNATURE* _____ DATE _____ PHONE* _____

RECORDS CHECK (To be filled out by person conducting records check)

968 (INITIAL): _____ A-CARDS (INITIAL): _____ CHS (INITIAL): _____

NAME OF CLERK (Print) _____ CLERK SIGNATURE _____ DATE _____

DECLARATION OF WITNESS

I certify that _____ *acknowledged in my presence that he/she had read and fully understood the meaning and consequences of the foregoing release, and signed it in my presence.

EXECUTED AT IRVINE, CALIFORNIA ON _____, 20__.

NAME OF CLERK (Print) _____ CLERK SIGNATURE _____ DATE _____

APPROVAL STATUS (TO BE FILLED OUT BY SERGEANT)

SERGEANT NAME _____ DATE _____ APPROVED: YES NO SIGNATURE _____

ASSIGNED TO OFFICER _____ SHIFT _____