

## IRVINE POLICE DEPARTMENT Police Patrol

## **RIDE-ALONG WAIVER FOR PERSONAL INJURY**

	ENT & RELEASE OF LIABILITY			
l,	*, 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 er	mployee.			
INITIAL	I AM AWARE THAT POLICE WORK IS A DANGEROUS OCCUPATION AND THAT RIDING IN A POLICE			
INTIAL	UNIT DURING AN OFFICER'S TOUR OF DUTY RESPONDING TO CALLS FOR SERVICE, E.G. DOMESTI VIOLENCE, ROBBERIES, BURGLARIES, STOPPING INDIVIDUALS OR VEHICLES ON THE STREET FO INVESTIGATION OF CRIMES ARE HAZARDOUS ACTIVITIES. I AM <u>VOLUNTARILY</u> PARTICIPATING I THESE ACTIVITIES WITH THE KNOWLEDGE AND APPRECIATION OF THE DANGERS INVOLVED AMONG WHICH COULD INCLUDE BEING SHOT, STRUCK BY A VEHICLE, EXPOSED TO HAZARDOU MATERIALS, INJURED IN A TRAFFIC COLLISION, OR HIT BY A THROWN OBJECT, AND HEREBY AGRE TO <u>ACCEPT AND ASSUME THE RISK OF PROPERTY DAMAGE</u> , INJURY OR DEATH.			
	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.			
INITIAL	In addition, I hereby <b>RELEASE AND DISCHARGE</b> 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.			
	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.			
INITIAL	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.			

## RIDE-ALONG WAIVER FOR PERSONAL INJURY

RELEASOR NAME*					
AGENCY AFFILIATION		DATE OF BIRTH*			
DDRESS*			DRIVER'S LICENSE NUMBER	* STATE	
CITY	STATE	ZIP	PHONE*		
	SIMIL	211	THORE		
AVE YOU EVER BEEN ARREST	ED? YES NO If Y	ES, explain below:			
SIGNATURE* DAT					
IF UNDER 18 YEARS OF AG	E, A PARENT/GUARDIAN SI	GNATURE IS REQ	UIRED.		
	•	•			
PARENT NAME*		PHONE*			
PARENT SIGNATURE*		DATE			
RECORDS CHECK	(To be filled out by perso	on conducting re	cords check)		
968 (INITIAL):	A-CARDS (INITIA	L):	CHS (INITIAL):		
CLERK NAME	CLERK SIGI	NATURE	DATE		
DECLARATION O	F WITNESS				
I certify that			* acknowledged in my pres	sence that he/s	
had read and fully understoo	od the meaning and consequ	uences of the foreg	going release.		
EXECUTED AT IRVINE, CALIF	ORNIA ON THISDA	Y OF			
CLERK NAME	AME CLERK SIGNATURE		DATE		
PPROVAL STATUS (TO BE F	ILLED OUT BY SERGEANT)		APPROVI	D DENIED	
SERGEANT NAME:	SIC	SNATURE:	APPROVED DENIED  DATE:		
SENGEAINT MAINE.					
OFFICER ASSIGNED:		X SHIFT:			