



Winston Police Department

Ride Along Information, Application, and Liability Agreement

Ride Along Qualifications

Ride Along candidates will have zero felony convictions in Oregon (or other states), be at least 15 years of age, and have no convictions or arrests for misdemeanor crimes or criminal violations (Minor in Possession of Alcohol or Tobacco, Unlawful Possession of Less Than One Ounce of Marijuana, etc...) within the previous calendar year.

Information

1. No alcohol is to be consumed within 8 hours previous to the ride-along. No person shall be allowed to ride who, in the opinion of the Officer, is under the influence of intoxicants, prescription drugs or otherwise impaired.
2. You may not carry weapons during this ride-along, including but not limited to mace or tear gas components, knives of any size, Tasers, or firearms. Prohibition of weapons includes persons authorized to carry concealed weapons by permit. (Exception: other law enforcement Officers)
3. Female riders shall wear slacks, pant suit, jeans or other like clothing. Dresses or skirts are not permitted. No pumps or high heels. Shoes should be low or no heel. Purses are permitted but should be of a small type with essential items only.
4. No guarantee exists that you will be returned to the station exactly at the scheduled time the ride-along is to end. The need of the task being performed by the Officer has priority though efforts will be made to accomplish your return as soon as possible. If you are scheduled to ride for less than an entire shift and desire to complete the remainder of the shift with the Officer, at the Officer's discretion, this may be granted.
5. No guarantee exists as to breaks or eating periods. Ensure you are sufficiently fed previous to the shift that if need be, you can complete your hours without significant discomfort. The Officer is not responsible for your expense of any food or beverage you may wish to purchase.
6. Recording devices, whether audio or visual, including but not limited to smart phones, micro cassettes, standard cassettes, still cameras, video cameras, etc. are not authorized. Recording in any medium any person arrested or any complainant, victim, witness, suspect, subject, or property of the persons named is expressly forbidden. (Exception: authorized media)
7. During your ride-along you may witness events which will be introduced to the criminal justice system. You may be identified in the police report as a witness to the event. It is possible that you may be subpoenaed to testify in legal proceedings as to what you saw. Should you be subpoenaed, you are neither entitled to nor will you receive any compensation from the Winston Police Department.
8. In some instances it may be known that the call to which the Officer is responding is hazardous. Threats also may approach the Officer unannounced. Your presence with the Officer or your presence in the police vehicle may increase your risk of personal injury, maiming, or death. Although every action will be taken to protect you, there are no guarantees. Your acceptance to ride along is your acknowledgment of these risks and your agreement to not hold the City of Winston, the Winston Police Department, and any employees or agents responsible, either morally or financially for damages arising from your ride-along with the Officer.

9. If for any reason the Officer determines there to be a conflict of interest, jeopardy, or undue interference with his tasks, at his discretion, he may terminate the ride-along and return you to the station.
10. Law enforcement is a career of confidentiality. With or without the consent of those involved, police officers enter people's private lives. You are expected to maintain this confidentiality of all you see or hear during your ride-along.
11. NOTICE: A criminal history check and other routine investigative methods will be utilized to check your background prior to allowing you to participate in the ride-along program. Person's with a misdemeanor conviction(s) at least 13 months previous to the application date will be approved or disapproved on a case by case basis by the Sergeant or Ride Along Program Coordinator. By signing this Winston Police Department Ride-along Program Application I hereby grant permission to the Winston Police Department to conduct the necessary background checks to determine my eligibility to participate in the ride-along program.

I Certify That I Have Read And Will Comply With The Above Regulations.

Signature: _____ Date/Time: _____

Supervisor: _____ Date: _____

Applicant Information:

Name: _____
Last First Middle

Mailing Address: _____

Physical Address: _____

City _____ State _____ ZIP _____

Home Phone: _____ Work Phone: _____

Occupation/Employer: _____

Sex: _____ Age: _____ Birthdate: _____ Social Security Number: _____

Driver's License Number: _____ State: _____

I Have Participated In The Ride-along Program _____ (DAYS) during this calendar year.
Participants are allowed to ride along a total of one (1) day per year, not to exceed 8 hours per day.

Do you have any allergies or reactions to medications? Yes No Circle One
If yes, describe _____

Are there any medical considerations of which we should be aware during your ride-along?
Examples: Epilepsy, Hemophilia, Diabetes, etc.

Is there any information that you wish to provide previous to your ride-along that you feel is important or should be brought to our attention?

What day and time would you like to participate in the ride-along program? M TU W TH F S SU
(Please circle all that apply) From: _____ m To: _____ m

Why do you want to ride patrol with an Officer of the Winston Police Department? _____

Are you taking any drugs or medications? Yes No Circle One
If yes, what: _____

In Case Of An Emergency Notify:

Name: _____ Relationship: _____

Physical Address: _____ City _____ State _____ ZIP _____

Telephone: _____

Alternate Name: _____ Relationship: _____

Physical address: _____ City _____ State _____ ZIP _____

Telephone: _____

The Chief of Police or his designee retains the right to allow or dis-allow any applicant from participating in the Winston Police Department Ride-Along Program.

LIABILITY RELEASE READ CAREFULLY

I, _____, the undersigned hereby request permission to accompany a member of the Winston Police Department as a participant in the Winston Police Department Ride-along Program.

I am aware that police work is hazardous. Prior to my executing this agreement I have been made aware of and understand that by participating in the Winston Police Department's Ride-along Program I am exposing myself to risks that may result in damage to my personal property or injury to my physical / mental well-being. I am also aware that by participating in the program I may see places, people, or things that are emotionally / psychologically upsetting to me.

Despite my knowledge of the risks involved I nevertheless knowingly and voluntarily assume any or all risk associated with my participation in the Winston Police Department's Ride-along Program. I also agree that in the event of an accident, illness, or other incapacity associated with my participation in the program, I will assume and pay for my own medical and emergency care expenses.

In exchange for permission to participate in the Winston Police Department's Ride-along Program, I hereby release and hold harmless the City of Winston, the Winston Police Department, administrators of the City of Winston and the Winston Police Department, Officer's and Dispatchers of the Winston Police Department, and agents of the Winston Police Department from any or all actions or claims or demands whatsoever that may arise out of my participating in the program. I intend this release and hold harmless agreement to forever bind myself as well as my estate, personal representatives, guardians, conservators, parents, heirs, executors, administrators, or assigns. I hereby agree to the terms and conditions set forth in the accompanying rules and regulations for the police ride-along.

BY MY SIGNATURE BELOW I HEREBY REPRESENT THAT I HAVE READ, UNDERSTAND, AND CONSENT TO THIS AGREEMENT CONSISTING OF 4 PAGES PERTAINING TO THE WINSTON POLICE DEPARTMENT RIDE-ALONG PROGRAM.

Signature of Rider Date Signature of Legal Guardian (Rider under 18) Date

Supervisor Approving Rider Date Approved by C.O.P. or Sgt. (Rider under 18) Date