



UINTAH COUNTY SHERIFF'S OFFICE

Vance Norton, Sheriff
R. Ed Spann, Chief Deputy

RIDE-ALONG WAIVER FORM

AGREEMENT ASSUMING RISK ON INJURY, DAMAGE, OR DEATH WAIVER AND RELEASE OF CLAIMS; AND AGREEMENT NOT TO SUE

Whereas the undersigned, not being a sworn member, employee or agent of the Uintah County Sheriff's Office, has made a voluntary request for permission to ride as a guest or observer in a law enforcement vehicle at a time when such vehicle is operated and manned by members of the Uintah County Sheriff's Office and has further requested permission to accompany a member or members of said law enforcement department during the active performance of their official duties as peace officers: and

Now, therefore, be it understood that the undersigned hereby agrees that THE WORK AND ACTIVITIES OF THE SHERIFF'S OFFICE ARE INHERENTLY DANGEROUS INVOLVING SUBSTANTIAL RISKS including the risk of death; personal injury, and/or property damage; such risks may be generated by individuals breaking, or suspected of breaking the law; by the apprehension, or attempted apprehension, of such individuals; by motor vehicles driven by peace officers or by others; or may occur in a truly limitless variety of ways; AND THAT THE UNDERSIGNED WILL BE EXPOSED TO SUCH RISKS BY ACCOMPANYING, OR PARTICIPATING IN, THE RIDE-ALONG.

Further, knowing all these risks, the undersigned nevertheless hereby agrees to voluntarily assume all risks, both known and unknown and to release and hold harmless all of the persons and entities named herein who, through negligence or intentional conduct, might otherwise be liable for damages.

Now, therefore, be it understood that the undersigned hereby agrees that Uintah County, and city within the county which contracts with Uintah County for law enforcement services, the Uintah County Sheriff's Office, the driver or owner of any automobile owned or operated by, or in the service of Uintah County or contract cities, their sureties, and each of them, shall not be held liable or responsible under any circumstances whatsoever by the undersigned, his or her estate, or heirs, for any death, injury, expense or loss to the person or property of the undersigned, incurred while riding as a guest or observer in any Uintah County Sheriff's Office vehicle or while accompanying a member of said department during the active performance of his official duties as a peace officer. The undersigned agrees not to sue any of the above for any possible death, injury, expense, or loss.

THE UNDERSIGNED: HAS READ THIS RELEASE AND FULLY UNDERSTANDS ITS CONTENTS: IS AWARE THAT THIS RELEASE IS A WAIVER OF LIABILITY AND HAS SIGNED THIS RELEASE VOLUNTARILY.

NOTE: THE SIGNATURE OF A PARENT OR GUARDIAN IS REQUIRED FOR THOSE GUESTS OR OBSERVERS UNDER THE AGE OF EIGHTEEN (18) YEARS.

SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN: _____

ADDRESS: _____

PHONE: _____

DATE/TIME OBSERVER TO RIDE: _____

APPROVED BY: _____

Patrol Sergeant
By:



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RIDE-ALONG PROGRAM RULES and REGULATIONS

(Bring this form with you on your ride-along)

The Ride-Along program provides the public with an opportunity to ride with a peace officer while performing regular duties. The program is designed to enhance your understanding of law enforcement. The following rules and regulations are designed to maintain the integrity and positive nature of this program.

1. All observers shall sign a release of liability. Observers under 18 years of age must have a parent or guardian sign the release of liability in the presence of a Uintah County Sheriff's Office employee (but not the assigned peace officer). Minors will only be permitted to participate if there is at least another minor in the same patrol vehicle.
2. Observers must wear appropriate attire. Sweaters, sport shirts, blouses, slacks, or dress pants are acceptable. Shoes must enclose the entire feet. No open toed shoes, shorts or tank tops are allowed. Be prepared for inclement weather. Your ride-along may be cancelled if you are inappropriately dressed.
3. Questions about procedures are welcome. However, they must be asked at the appropriate time. Observers should be careful not to interfere with the deputy at any time.
4. The observer is responsible to pay for his/her own meals.
5. Observers shall obtain authorization from the deputy prior to talking with prisoners, suspects, witnesses or other parties contacted on official business. Observers shall not participate in police activities, unless directed to do so by the deputy.
6. An observer may end his/her ride at any time simply by notifying the deputy. The deputy will discontinue the ride-along as soon as it is reasonably safe to do so.
7. If the deputy feels the performance of his duties are being impaired in any manner by the actions of the observer, the deputy has the authority to return the observer to the station and discontinue the ride-along.
8. The observer will be asked to complete a questionnaire at the end of the ride. We welcome your comments and suggestions.
9. The observer will wear the ID tag provided by the Uintah County Sheriff's Office on his/her outermost garment so it is visible at all times during the ride.
10. Observer is not permitted to take any photography or recording of any official business while on the ride-along.

I have read the above rules/regulations. I understand and agree to abide by them.

Signature of Observer

Date



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USE OF CRIMINAL INFORMATION AND DEPARTMENT OF MOTOR VEHICLE INFORMATION BY RIDE-ALONG PROGRAM PARTICIPANTS WITH THE UINTAH COUNTY SHERIFF'S OFFICE

As a "Ride-Along" with a deputy of the Uintah County Sheriff's Office, you may have access to confidential criminal records and/or Department of Motor Vehicle record information while participating in the Ride-Along Program. This confidential information is controlled by statute. Misuse of such information may adversely affect an individual's civil rights and violates the law.

Violation of this law, by you, as an observer of the procedures of the Uintah County Sheriff's Office, may result in your being prosecuted in a criminal and/or civil action.

Please initial:

- _____ I understand I am not to exit the patrol car unless I am told to do so.
- _____ I understand I am not to participate in conversations with any people the Deputy comes in contact with unless directed to do so by the Deputy.
- _____ I understand I am not to assist the officer in any way unless requested by the Deputy.
- _____ I understand the importance of confidentiality and will not discuss sensitive issues with anyone, **including immediate family**.

I HAVE READ THE ABOVE AND UNDERSTAND THE POLICY REGARDING THE MISUSE OF CRIMINAL RECORD INFORMATION AND DEPARTMENT OF MOTOR VEHICLE INFORMATION.

The information on this form will be read and signed by participants in the "Ride-Along" program at the Uintah County Sheriff's Office.

SIGNATURE: _____

DATE: _____

WITNESS: _____ TITLE: _____



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Patrol Services Ride-Along Check List

General Information (To be completed by applicant)

Name of Ride-Along _____
(Please Print) LAST FIRST MI

Other Names/Aliases _____ DOB _____

Home Address _____

Driver's License # and State _____

Are you currently attending the police academy? _____

Home Phone _____ Occupation _____
(If student: list school/grade)

In Case of Emergency Notify (To be completed by applicant)

Name _____ Relation _____

Address _____ Phone _____

Family Doctor or Medical Services Requested by Rider if needed: _____

Records Check (To be completed by Patrol Sergeant)

Local _____ Warrants _____ Records _____

Previous Ride-Alongs _____ Date Check Completed _____

Approval / Assignment (To be completed by Patrol Sergeant)

Assigned to: _____
Deputy Area Shift Date

Approved by: _____
Name Rank Date

Ride-Along Completed: _____
Deputy's Signature