

WARRENTON POLICE DEPARTMENT RIDE-ALONG REQUEST



Last Name:	First Name:	Middle:	
Date of Birth:	Other Names Used:		
Address:	Phone(s)		
Emergency Contact Person:			
Address:	Ph	one(s)	
Have you been arrested or convicte	ed of a crime? □Yes □No If ye	s, what crime(s):	
**Understand that a police records che	ck will be conducted to determine y	our eligibility to do a ride-ald	ong.
Have been on a ride-along in the la	st six months? □Yes □No Wh	ich officer?	
Date(s) Requested:		Time(s):	
If permission is granted, I agree to obe a scene or in command of any vehicle enforcement work and the possibility the physical harm or injury, including, but rest these risks. I further agree to keep consof the police department. I further understand I will be a guest papelice department, of any of its employ Wherefore, in consideration of this eduagree to hold the City of Warrenton, its agents, and servants harmless from ar proximate or remote, sustained during	that I may be riding. I fully realize a nat situations may arise which might not limited to motor vehicle crashes. fidential any things which I may obs assenger in the police vehicle in whi rees for the opportunity to ride in a part ocational benefit to be received by may and all liability to me for death, pen	and appreciate the basic nate tresult in my being exposed I nevertheless freely and vertheless freely and its children between the property described in the property descri	ure of law I to the danger of roluntarily accept so by the members any payment to the equest, I hereby ef, employees, amage, whether
Signature of Rider	 Date	Signature of Witness	 Date
Parental Consent: I, the undersigne of	, a minor under the age of eighteer bove to ride in an authorized police se which might result in his/her being arily accept these risks. a guest passenger in a police vehice employees for the opportunity for a centon, its Commissioners, the Warreless from any and all liability to the second contents.	n, do hereby request that the vehicle. I authorize a police g exposed to the danger of cle in which they ride. I have the above to ride in a police enton Police Department an above and to me for injury, p	e Warrenton Police records check and physical harm or e not offered any vehicle. d its Chief, property damage,
Signature of Rider	DateDO NOT WRITE BELOW THIS	Signature of Witness	Date
Records Check: LEDS/NCIC	☐ Justice By:	Date:	
Approved: ☐ Yes ☐ No If No, wh	y:	By:	
Officer Assigned:	Date:	Hours:	

WARRENTON POLICE DEPARTMENT

RIDE-ALONG POLICIES & PROCEDURES

Ride along applicant:

- 1. You are welcome to apply for a ride-along, completing and signing both sides of this ride along request. You must be at least 16 year of age and have parental consent to ride with a police officer. Ride-along is limited to two per year. The Chief of Police may grant exceptions.
- 2. Present this form to the police secretary or an officer. Normally this should be done five days in advance of the ride along date. Please call the police department 24 hours in advance between 8:00a and 5:00p to confirm your ride-along. Please note: You should be aware that there is no expectation that your request will be honored and your ride-along may be cancelled at the last minute.
- 3. By your signature on the opposite side of this form, you understand that you will undergo a police records check and may be disqualified based upon your police record.
- 4. Your role in a ride-along is to:
 - a. Remain in or return to the police vehicle in dangerous or sensitive situations or as directed by the police officer.
 - b. Comply with all directions by a police officer.
 - c. Not operate any equipment, unless the officer's safety is an issue and you receive the officer's permission.
 - d. Be an observer. Do not become involved verbally or physically unless the officer's safety is an issue or you are directed to assist. The City of Warrenton will not be liable for a ride-along's unauthorized intervention.
- 5. You must be in civilian clothing (shirt, blouse or jacket, slacks and shoes. Sandals, inappropriate T-shirts, tank tops, and ripped or torn shorts/blue jeans are not permitted. Hats and ball caps will not be worn in the police vehicle).
- 6. You shall not carry a firearm under any circumstances, even if you have a concealed weapons permit.
- 7. DPSST certified police officers must have permission from the Chief of Police to carry a firearm.
- 8. The personal safety of the officer and the Department's responsibility to the community will outweigh your desires at all times. Therefore, an officer may terminate your ride-along at any time, without explanation or advance notice. In addition, if an emergency occurs, you may be dropped off at the safest location. Every effort will be made to pick you up after the emergency has concluded.

9.	Check the one that BEST describes you:			
	☐ Spouse ☐ Relative ☐ Citizen ☐ H.S. Student ☐ College Student ☐ Applicant ☐			
	☐ Other:			
	. L.E. Officer DPSST #: Agency:			
	. Reason for ride-along request:			