

# STRATHAM, NH POLICE DEPARTMENT

FORM NAME: SPD-F-37



## CITIZEN RIDE ALONG REQUEST & WAIVER

*I request to ride along with a member of the Stratham Police Department for the following reason:*

☐ Educational (related to college or high school class)      ☐ Sworn officer from another jurisdiction  
☐ Career familiarization (interest in law enforcement)      ☐ Research oriented  
☐ Family member      Other: \_\_\_\_\_

### PERSON MAKING REQUEST:

NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

BEST TIME/DAY TO CONTACT: \_\_\_\_\_

EMERGENCY CONTACT NAME & NUMBER: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Parent/Guardian (if applicant is under 18 years old)

The Chief of Police ☐ **Approves** ☐ **Denies** this request. The Patrol Supervisor is directed to contact the applicant and make arrangements for the ride along to occur per Department Policy TRF-7 "Civilian Ride Along Program".

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief of Police

### PATROL SUPERVISOR ACTIONS:

Date & time ride along is scheduled: \_\_\_\_\_ Officer Assigned: \_\_\_\_\_

Waiver of Liability has been signed and made part of this file: ☐ Yes ☐ No

Any notes concerning this rider during their ride along:

## RELEASE AND WAIVER

KNOW ALL that I \_\_\_\_\_ on my own behalf and on behalf of my heirs, next of kin, executors, administrators, estate agents and assigns and representatives of any nature whatsoever, for and in consideration of the authorization and permission to ride along with a Stratham Police officer, which has been granted to me at my voluntary request, after having been fully advised of the potential hazards of such activity or activities, do hereby WAIVE AND RELEASE all demands, damages, actions, causes of action, suits and claims of any nature whatsoever, whether in law or in equity, that I or my heirs, next of kin, executors, administrators, estate agents and assigns, and representatives of any nature whatsoever might otherwise have against the town, the police department and each and every officer, official, member, employee, agent and attorney thereof and therefore and his or her heirs, next of kin, executors, administrators and estate, on account of my death or injuries, both to person and to property, or develop at any time in the future as a result of my activities or association with the police department, whether in a police vehicle, in the police station, or otherwise associated with the police department, whether in a police vehicle, in the police station, or otherwise associated with the police department and officers and officials thereof in any manner whatsoever.

It is expressly agreed and understood that this WAIVER AND RELEASE shall apply for the express purpose of precluding forever all claims, suits, demands, damages and causes of action that I or my heirs, next of kin, executors, administrators, estate agents and assigns and representatives of any nature whatsoever might otherwise assert against any of the aforesaid parties as a result of my association and activities with the Police Department during (date and time of ride along): \_\_\_\_\_.

It is further agreed and understood that I will abide by the following stipulations during my ride along:

1. Provide my own transportation to and from the Police Department.
2. Obey the orders and instructions given by the officer to whom I am assigned.
3. Must not leave the patrol vehicle unless instructed to do so by the officer.
4. Will wear a bullet proof vest supplied by the Stratham Police Department.
5. Will not carry or display a firearm while riding.
6. Will not converse with any prisoners, suspects, victims or witnesses nor participate in any police activity unless directly requested by officers.
7. Will not discuss names of persons involved in police cases or incidents. I understand that I will be considered a confidant of the Police Department and it is essential that all matters pertaining to evidence or statements gathered in investigations be held confidential.
8. Understand that tape recorders and cameras will not be permitted while participating in the program.

I hereby declare that the terms of this *WAIVER AND RELEASE* have been fully read and understood by me and freely and voluntarily entered into, accepted by me and I hereby acknowledge receipt of a copy of this agreement.

In further consideration of the aforesaid authorization and permission granted to me at my own request. I hereby promise and agree to fully comply with all instructions given to me for the purpose of protecting my personal safety and that of my property.

\_\_\_\_\_  
Signature of Applicant or Legal Guardian

\_\_\_\_\_  
Date

IN WITNESS WHEREOF, I have hereunto set my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Justice of the Peace/Notary Signature: \_\_\_\_\_

(SEAL)