

St. Augustine Beach Police Department Police Rider Application

Name: _____
Last First Middle

Social Security #: _____ Date of Birth: _____
Month/Day/Year

Home Address: _____
Street City State Zip

Work Address: _____
Company Name # Street City State Zip

Home Phone #: () _____ Work Phone #: () _____

Driver's License #: _____ State: _____

List other name(s) used (i.e., maiden): _____

Have you ever been arrested? Yes No If yes, list date, charge, location, and disposition:

I attest that all of the above information is true and correct.

Dated this ____ day of _____, 200__.

Applicant Signature

Officer Witnessing Signature

OFFICIAL USE ONLY

(Officer to date/initial when completed)

Police Rider Forms Signed:

Rules & Regulations: _____

Liability/Indemnity Release: _____

Background Check:

FCIC: _____ NCIC: _____ Local: _____ DHSMV: _____

Comments: _____

Application: **Approved** **Denied**

If denied, indicate reason: _____

Supervisor's Signature/Date

St. Augustine Beach Police Department Police Rider Rules and Regulations

Riders must fill out the "Police Rider Application" and "Police Rider Release of Liability and Indemnity Agreement" and be pre-approved in order to participate in this program.

Riders shall be clean and neat in appearance and attire (casual business attire required). If the attire is not appropriate, the rider may be denied participation until the deficiency is corrected.

Riders will schedule a ride-along in advance. Riders will report to the front lobby of the St. Augustine Beach Police Department and await the officer to whom they are assigned.

Riders will follow the instructions of the officer at all times. Riders are not to handle evidence or discuss the case or investigation with others outside of the police department (i.e., victim, witness, suspect, media, etc.).

When responding to a dangerous situation, the officer may (if time permits) leave the rider at a safe place (i.e., open business) until the call is concluded.

Riders are prohibited from carrying or possessing weapons while participating in the program unless they are duly appointed law enforcement officers.

The rider may cease participation in the program at any time or the officer may discontinue the ride-along at anytime by delivering the rider back to the police department as soon as practical.

The rider will be issued a clip-on identification card for which they will exchange a piece of personal identification (i.e., driver's license) to ensure the identification card is returned. The identification card will be worn in full view at all times while participating in the program.

At the conclusion of the ride, the rider will return the clip-on identification card to the officer in exchange for their identification and will be provided a "Police Rider Comment Sheet".

I have read and understand the above listed rules and regulations which apply to the Police Rider Program. I agree to abide by these rules and regulations and understand that failure to follow any of the rules and regulations may result in the immediate termination of my privilege to participate in the program.

Applicant Signature

Date

Printed Name of Applicant

Officer Witnessing Signature

St. Augustine Beach Police Department Police Rider Release of Liability and Indemnity Agreement

I understand that being a passenger in a police car is inherently dangerous because a police officer may be called upon, without warning, to engage in inherently dangerous activities relating to law enforcement, i.e., shootings, disturbances, high-speed pursuits, etc.

In consideration for being permitted to be a passenger in a police vehicle and observe activities of members of the St. Augustine Beach Police Department ("the Activities"), and any police agency with whom it may be cooperating, the undersigned hereby releases and discharges the City of St. Augustine Beach, the St. Augustine Beach Police Department, any other police agency with whom they may be cooperating, their insurance carriers, their legal representatives, their present and former affiliates, predecessors, and successors, their present and former officers, employees, agents and representatives, and the respective heirs, administrators, executors, successors, and assigns of any of the foregoing ("collectively the City"), from any and all claims, causes of action, suits, or demands for personal injury, death or property damage, accrued or to accrue in the future known or unknown, relating to or arising out of any negligent, grossly negligent, and/or intentional acts on the part of the City, its agents, servants, or employees in connection with the undersigned's entry into and participation in the Activities.

The undersigned further agrees, on behalf of himself/herself and on behalf of any and all of his/her heirs, successors and assigns, indemnify, defend, and save and hold harmless the City from expenses and legal fees incurred in defending the same, made by, through or against the undersigned or on his/her behalf, relating to or arising out of any negligent, grossly negligent and/or intentional acts on the part of the City or the undersigned in connection with undersigned's entry into participation in the Activities.

I further agree to venue in St. Johns Count, Florida, for all purposes. The undersigned warrants that he/she has read this agreement and fully understands it to be a release of all claims, known or unknown, past or future, that he/she has or may have against the City.

I HAVE READ THIS RELEASE OF LIABILITY AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signature of Police Rider

Date

Printed Name of Police Rider

Officer Witnessing Signature

Police Rider Address