



CLEVELAND DIVISION OF POLICE

Adult Ride- Along Release

I, _____ , _____ , _____ ,
 (NAME OF PROSPECTIVE RIDE- ALONG) (SOCIAL SECURITY NUMBER) (DATE OF BIRTH)
 residing at _____ , _____ , _____ ,
 (HOUSE NUMBER AND STREET) (CITY) (STATE)
 request permission to accompany officers of the Cleveland Division of Police on a tour of duty
 beginning on or about _____ AM/PM _____ , _____ and ending
 (TIME) (MONTH AND DATE) (YEAR)
 _____ AM/PM _____ , _____ .
 (TIME) (MONTH AND DATE) (YEAR)

CAUTION: READ THIS DOCUMENT IN ITS ENTIRETY BEFORE SIGNING

I certify that I am 18 years or more of age and that I have never been convicted of a felony offense.

I have been advised and I understand that emergency personnel employed by the City of Cleveland, including those employed by the Divisions of Police, Fire and Emergency Medical Services, are subject to emergency assignments at any time. I further understand that such personnel are exposed to personal injury in the course of their work and that personnel of such Divisions have been injured and killed in the course of their work.

I acknowledge that I am a lay observer only. As such, I agree not to enter any private residence or private property that is not otherwise accessible to the general public or any area that the escorting officer deems inappropriate. I am aware and understand that the work of the Cleveland Division of Police is inherently dangerous, and that I may be subjected to the threat of death or personal injury, or damage to my property, by accompanying a member(s), employee(s), officer(s), agent(s), of the Division of Police during the performance of their official or unofficial duties. I freely, voluntarily, and with such knowledge assume any and all risks of death, personal injury, or property damage arising from, or in any way connected with the use of weapons, unlawful acts, or resistance by law violators, detainees, or arrested persons. Furthermore, I freely, voluntarily, and with such knowledge assume any and all risks of assault, riot, breach of peace, vehicle accidents, fire, explosion, gas, electrocution, escape of a radioactive substance, or any violation(s) of the Ohio Revised Code or Cleveland Municipal Ordinances while accompanying a member(s), employee(s), officer(s) or agent(s) of the Division of Police during the performance of their official or unofficial duties.

That the City of Cleveland, Chief of Police, his/her sureties, any and all member(s), employee(s), officer(s) or agent(s) of the Cleveland Division of Police, their sureties, and each of them shall not be responsible or liable for any injury, damage, loss, or expense, either to myself or my property, incurred while riding in any vehicle assigned to the Cleveland Division of Police, or while accompanying any member(s), employee(s), officer(s) or agent(s) of said Division during the performance of their official or unofficial duties resulting from any negligent act or omission on the part of any member of the Cleveland Division of Police.

I acknowledge and accept that during any and all time I am riding in any vehicle assigned to the Cleveland Division or City of Cleveland, I am in the status of a guest. As such, my ride-along privileges may be revoked at any time for any reason by member(s), employee(s), officer(s), or agent(s) of the Division of Police.

I for myself, my heirs, executors, administrators, and assigns do release, hold absolutely harmless and forever discharge the City of Cleveland, any and all officer(s) of the Cleveland Division of Police, their sureties and each of them, against any and all claims, suits, debts, demands, actions, causes of action, or liability or expense of every kind and nature incurred or arising by reason of any actual or claimed negligent or wrongful act or omission on the part of any member of the Cleveland Division of Police while riding in any vehicle assigned to the Cleveland Division of Police or the City of Cleveland while accompanying any member(s), employee(s), officer(s) or agent(s) of the Division during the performance of their official or unofficial duties I may now or hereafter have against the City or officers on account of injuries or damages sustained by me arising out of or in any manner connected with the ride- along.

I agree to provide evidence of liability insurance coverage of not less than \$1,000,000, combined bodily injury/property damage, which is satisfactory to the Cleveland Division of Police and which shall name the City of Cleveland, its member(s), officer(s), employee(s) or agent(s) as additional named insured(s).

I agree to defend, indemnify and hold the City absolutely harmless from any and all claims related to or in any way arising out of my actions while participating in the ride- along.

I understand that permission to participate as a ride- along is not assignable or transferable and is subject to cancellation at any time by any type of notice.

I further state that I have carefully read this release and understand the contents.

Signature of Ride-Along Applicant Date

Sworn to before me this _____ day of _____, A.D., 20__

(Notary Public for State of Ohio)

My commission expires: _____

I ___ would ___ would not like to be issued body armor for the ride- along.

Date: _____ Signature: _____

Phone: _____ Place of Employment: _____

Witness: _____ Address: _____

Witness: _____ Address: _____

Commander's Approval: _____

Deputy Chief's Approval: _____