

GOODYEAR POLICE DEPARTMENT
Submit completed forms in person: Goodyear Police Operations Building, 11 N 145th Ave, Goodyear, AZ 85338.

Ride-Along Request Form/Waiver of Liability RIDE-ALONG ELIGIBILITY

The Goodyear Police Department ride-a Residents of the City of Goodyear Those participating in city programs Those invited to attend a ride-along Name of Department Employee E	Emples such as the by a member axtending I	oyees of the e City of Go er of the De nvitation:	City of G odyear Cit partment.	oodyea tizen's A	r			
APPLICANT INFORMATION								
Last Name:	First Nam	t Name		M.I.	DOB:	Sex:	M	F
Other Alias Names (if applicable):		Social Security No:						
		Driver's Lic	ense Num	ber and	and State:			
Street Address:		City:			State:		Zip:	
Email:	Home Phone N				Cell Phone: ( )			
Do you have any physical disabilities which require accommodations?  Yes No (If yes, please describe):								
Have you ever been arrested?  Yes  No (If yes, please describe):								
Have you ever been convicted of a crime?								
Are you on probation and/or parole for any criminal offense?								
Are you currently involved, in any way (i.e. suspect, victim, witness, etc.), in a criminal or civil action involving the Goodyear Police Department?   Yes No (If yes, please describe):								
Date requested for ride-along: Specific officer requested:  Tues-Friday Shift 1 (5am-3pm) Shift 2 (1pm-11pm) Shift 3 (8pm-6am)  Saturday-Tuesday Shift 1 (5am-3pm) Shift 2 (1pm-11pm) Shift 3 (8pm-6am)  Applicants Emergency Contact Information (Required Information)								
Last Name:		Name:	ormation (1	Require	Relationsh			
Address:	1 1130	Tvaiiic.			Relationsi	пр.		
Phone No: ( )		Alte	rnate No. (	( )				
Waiver and Release of Liability (See back for Rules and Information)								
In consideration of my being permitted to participate in a ride-along with the Goodyear Police Department, I voluntarily release and agree to hold harmless the City of Goodyear, its employees, and agents from any and all liability for any damage, serious injury or death which I may receive while participating in a ride-along which includes all incidental and related activities. I acknowledge that law enforcement is hazardous and my participation may place me in great danger of serious and/or permanent bodily harm or death. I understand and agree that the City and its employees, including police officers whom I accompany, are not insurers of my safety. This waiver and release of liability signed by me shall be binding on me, my heirs, my assigns, and my personal representative. I understand and accept the risks of riding with a law enforcement officer. I have read and understand this release and waiver, and sign it voluntarily; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made.								
Signature of Applicant Date								
Signature of Parent/Guardian (if applicant under 18 yrs of age) Print Name  (For office use only)  Date								
Local Files:  ACIC/NCIC:  City Bookings:  Ride-Along:  Approved  Scheduled Ride-Along:  Date / /  Patrol Lieutenant/ Watch Commander:	e	See See See	Attached Attached Attached Attached		App App App ift Supervisor:	roved roved roved		



11 N. 145<sup>th</sup> Ave Goodyear, AZ, 85338 (623) 932-1220

# **Ride-Along Rules and Information for Applicant**

# **Automatic Disqualifiers:**

Any applicant may be disqualified from participating in the program. Automatic disqualifiers include, but are not limited to, the following factors:

- Being under 16 years of age (except Police Explorers)
- Any felony convictions or felony charges pending
- Any misdemeanor conviction in the past year, or misdemeanor charges pending
- On probation
- Pending law suit or party to pending lawsuit against the City or Department
- Denial by any supervisor

### **Ride-Along Program Requirements:**

Once approved, civilian ride-along participants will be allowed to ride no more than two (2) times in twelve months.

All participants in the ride-along program will be required to sign the ride-along waiver form. Any person under the age of 18 years must have the ride-along waiver form signed by a parent or legal guardian.

No more than one ride-along participant will be allowed in the officer's vehicle at a given time. When practicable, ride-along participants who request multiple opportunities to participate in the ride-along program will be rotated among officers.

### **Ride-along Suitable Attire:**

Any person approved to ride-along is required to be suitably dressed in a collared shirt, blouse or jacket, slacks or jeans and shoes. Sandals, T-shirts, tank tops, shorts and ripped or torn blue jeans are not permitted. The Watch Commander or field supervisor may refuse a ride-along to anyone not properly dressed.

## **Ride-Along Responsibilities:**

It is the responsibility of the ride-along participant to get transportation to and from the Police Operations Building located at 11 N. 145<sup>th</sup> Ave. before and after the ride-along and to arrive at the agreed time.

Civilian participants will not be permitted to have any guns or knives in their possession during the ride-along. Any violation of this rule will end the ride-along and the rider will be prohibited from any future ride-along participation with the Goodyear Police Department.

The ride-along will follow the directions of the officer. The ride-along will not become involved in any investigation, handling of evidence, discussions with victims or suspects or handling any police equipment.

The ride-along may be ended if the ride-along applicant interferes with the performance of the officer's duties or does not follow directions.