



**Town of Hotchkiss
Police Department**

PO Box 276
276 W Main St
Hotchkiss, CO 81419
970-872-3848

Application for Ride-Along

Please complete the requested information on this form. The attached Release and Indemnification Agreement must be signed and notarized. Please submit complete packet a minimum of three business days before date of requested ride-along. Thank you for your interest in the Ride-Along program.

Please attach a copy of your valid Driver's License.

Name (First/Middle/Last): _____

Address: _____

Phone (Circle one: Home/Work/Cell): _____

Phone (Circle one: Home/Work/Cell): _____

Requested Date of Ride: _____ Requested Start Time: _____

Requested Officer (if any): _____

Please list any health concerns: _____

Emergency Contact:

Name (First/Middle/Last): _____

Address: _____

Phone (Circle one: Home/Work/Cell): _____

Phone (Circle one: Home/Work/Cell): _____



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HOTCHKISS POLICE DEPARTMENT RELEASE AND INDEMNIFICATION

I, _____, in and for the consideration of the Town of Hotchkiss permitting me to ride as an observer in a Hotchkiss Police vehicle, while such vehicle is used for on-duty police functions, do hereby release and forever discharge and covenant to hold harmless, for myself and my heirs, personal representatives, administrators, successors and assignees, the Town of Hotchkiss and the Police Department and any of their officers, agents or employees, any and all other officers agents or employees, and any and all other persons, firms and corporation of and from any and all liability for any and all claims, demands, damages, costs, liabilities, losses and causes of action, which may arise incidental to my accompanying such Town employees or agents in such vehicle on any occasion on which I ride as an observer. I further understand that police activities, by their very nature, can and will in all probability, involve some danger. I hereby fully assume the risk for any of the potential dangers which are associated with police patrol activities as a condition to being granted this privilege. I further agree to fully indemnify the Town of Hotchkiss and the Police Department and any and all of their officers, agents or employees from any and all third party claims, demands, or causes of action for damages, costs, liability and losses of any kind which result from an injury due to acts or omissions on my part at any time upon which I am a participant in the Hotchkiss Police Department Ride-Along Program. I understand that the privilege and authorization which is granted to me by the approval of this Release and Indemnification Agreement may be revoked at any moment, if in the opinion of the supervising officer or any Police Department member, my actions constitute a hazard or hindrance to any aspect of police duties or safety. I further warrant that no promise or inducement has been offered except as herein set forth that this Release and Indemnification Agreement is executed without reliance upon any statement or representation by the persons or parties released, or their representatives, concerning the nature or extent of any potential damages or legal liability therefore. I warrant that I am legally competent to execute this document. (This paragraph applies only to those 18 years of age or older.)

Dated this _____ day of _____, 20____.

_____ (Signed in presence of notary)

Sworn to and subscribed before me this _____ day of _____, 20____.

_____, Notary Public

My Commission Expires on ____/____/20____

PARENTAL PERMISSION AND AGREEMENT (Necessary for all persons under 18 years of age)

I, _____, am the parent or legal guardian of _____, who is a person under 18 years of age. I have read and understand this Release and Indemnification Agreement.

_____ has my permission to ride as an observer in a Hotchkiss Police vehicle as provided above. It is hereby agreed that I am a party to this Release and Indemnification Agreement and that said agreement is binding upon me, said child, and any and all our legal heirs and successors of whatever kind. I further warrant that I am legally competent to execute this document. Without limiting the generality of the foregoing, I acknowledge that I am the parent of the above-named observer as the term "parent" is defined in C.R.S. Section 13-22-107(2)(b), and I hereby waiver and release any prospective claim of said observer against the Town, its officers, and its employees for negligence, to the extent provided in C.R.S. Section 13-22-107(3), in connection with the above-described activities.

Dated this _____ day of _____, 20____.

_____ (Signed in presence of notary)

Sworn to and subscribed before me this _____ day of _____, 20____.

_____, Notary Public

My Commission Expires on ____/____/20____