



Theresa Police Department

Ride Along Waiver / Request Form

(Last Name) (First Name) (Middle Name) (Date of Birth)

(Address) (City) (State) (Zip Code)

(Driver's License or ID #) (Home Phone) (Work Phone)

(Parent or Spouse's Name) (Phone #)

(Address) (City) (State) (Zip Code)

Reason for ride-along request (i.e. school, criminal justice related field, media, etc.)

Date Ride-Along Requested

Date Assigned

Officer Assigned

Approved _____
(Supervisor's badge #)

Not Approved _____
(Supervisor's badge #)

Waiver of Claims

I, _____ of _____
(Name) (Address)

In consideration of being permitted to ride in a Theresa Police patrol car, I agree that the Village of Theresa, its agents, and officers shall not be liable for any damage or injury that may be sustained by me while riding as a passenger in said patrol car or cars whether or not said damage or injury should be caused or be due in whole or in part by, due to, or contributed to, in whole or in part by, negligence of the Village of Theresa, its agents, or employees.



Theresa Police Department

Participation Agreement

I understand an abbreviated background check may be done, and I will comply with the following:

1. Arrive at the agreed upon time, appropriately attired.
2. Obey all orders or requests related to my safety or protection made by any officer.
3. Not interject myself into any situation without prior approval by an officer.
4. Keep any radio or face-to-face emergency communications witnessed by the ride-along participant confidential.
5. At no time should the ride-along passenger interfere with law enforcement operations. At any time, an emergency vehicle may be requested to respond to an emergency situation. Passengers should remain quiet and never operate the radio, siren, or emergency lights.
6. Participants cannot possess or consume alcoholic beverages (or any other prohibited substances) before or during their ride-along.
7. Participants must wear their seatbelt at all times.
8. Passengers must remain in the vehicle at all times unless informed to do otherwise by the law enforcement officer. They are not to participate in foot pursuits, restraints or any other law enforcement activity unless directed to by officers.
9. Even if the participant possesses a concealed carry permit, they are not to be allowed to carry any type of weapon.
10. Participants must agree to not publicly discuss confidential police matters. Additionally, they must never take pictures or record sound/video during ride-along activities.
11. Completion of this form is not a guarantee for a ride along. Completed forms must be submitted and approved by the chief of police, either in writing or by email at dmarkus@theresapolicewi.gov.

Failure to comply with these instructions will result in termination of my participation and I will be returned to the Theresa Police Department.

I affirm that I have read the above instructions and that by my signature, I agree to and will cooperate with all the instructions listed herein. NOTE: Waiver must be witnessed by officer or other agency employee PRIOR to the ride-along occurring.

Participant's Signature

Parental Signature (if under the age of 18)

Witnessed by (Officer or Supervisor)

Time in: _____

Time out: _____

Supervisor Checklist (for supervisor use only):

- DL check complete
- Criminal history check complete
- In-house check complete
- Added to schedule
- Notified assigned officer