



**YOLO COUNTY SHERIFF'S DEPARTMENT
APPLICATION FOR CITIZENS RIDE-ALONG**

41793 Gibson Road
Woodland, California 95776
(530) 668-5280

PLEASE PRINT OR TYPE

Name: _____ Address: _____
City: _____ State: _____ Zip Code _____ Date of Birth / /
Driver's License No. _____ Business Phone: _____ Home Phone: _____
Occupation: _____ Employer: _____

Check Box

Day of week you wish to ride: Sun Mon Tue Wed Thur Fri Sat
Preferred Shift: 12am to 4am 8am to 12pm 4pm to 8pm 6pm to 10pm

**WAIVER AND RELEASE OF ALL CLAIMS FOR PERSONAL INJURY AND PROPERTY
DAMAGE**

I, _____ am Under Over the age of eighteen years and at least sixteen years of age with parental permission and not being a member of the Yolo County Sheriff's Department, have made a voluntary request to ride as a guest in a vehicle assigned to the Yolo County Sheriff's Department during the performance of their official duties.

I also understand that I may ride once every six (6) months, unless special permission has been granted by the Division Commander.

As a citizen on the Ride-Along Program I understand I will be required to dress appropriately for existing weather conditions. No apparel or special equipment will be provided to participants by the department. As a participant I will dress neatly. I will not wear sandals, T-Shirts, halter tops, or shorts. For summertime ride-along with the Boat Patrol, conservative shorts, soft soled shoes and conservative tops may be worn.

All Citizen Observer/Ride-Along will be expected to comply with the following rules as well:

- Do not engage the deputy in excessive conversation to the point of impairing the deputy's performance.
- Refrain from telling the deputy on how to perform their duties.
- Remain in the vehicle or watercraft unless exiting is approved by the deputy.
- Do not carry weapons or firearms, cameras, tape recorders, portable radios, or any device that may distract the deputy from his/her duty. This includes those individuals who possess a valid Concealed Weapons Permit. This includes all peace officers unless approval from a supervisor has been given.
- Refrain from using the Sheriff's Department equipment.
- Keep all information confidential concerning investigations and arrest.
- Following all instructions given by the deputy.

I, therefore, in consideration of the privilege of participating in the Yolo County Sheriff's Citizens Ride-Along Program, do hereby waive, release, and forever discharge the County of Yolo, the Yolo County Sheriff's Department, and any officer, employee, servant or agent of each, or their successors, heirs, executors, administrators, or assigns, from and against any and all claims, suits, demands, and/or liabilities of whatever kind or nature, including attorney's fees, which arise out of their liability for causing any injury or damages which may have been sustained as a result of my participation in the Citizens Ride-Along Program.

This waiver and release includes all injuries and/or damages, whether know or unknown, foreseen or unforeseen, and whether they are latent or occur later as a result of the activities set forth above.

This waiver and release is a general release, and is expressly made with knowledge of and a waiver of reliance on, the provisions of §1542 of the California Civil Code, which provides as follows:

A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor.

I have read this release and understand the terms used in it and their legal significance. I have executed this release voluntarily.

Dated: _____

Signature

Parent's Signature if Under 18

I have been advised and am aware of the possible dangers associated with this Ride-Along.

Dated: _____

Signature

Parent's Signature if Under 18

FOR DEPARTMENTAL USE ONLY	
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED Reason for Disapproval: _____
_____ SUPERVISOR'S SIGNATURE	_____ OFFICER ASSIGNED RIDE-ALONG
_____ DATE ASSIGNED TO DEPUTY	_____ DATE INDIVIDUAL RODE