



Rock Springs Police Department



Ride Along Request & Authorization

I, **the below named**, request permission, for my personal benefit, the privilege of accompanying members of the Rock Springs Police Department while on general duty in the City of Rock Springs, which will include my being in and about city owned vehicles, and city owned property, as well as, all public ways and thoroughfares owned, leased, or in possession of any government agency.

In consideration of this privilege, I do hereby knowingly and unequivocally agree to save harmless, indemnify, release, defend, and forever discharge the City of Rock Springs, its representatives, officers, agents, and employees from any and all liability, loss, cost, damage, injury, claims, causes of action, demands or judgments of every kind and nature whatsoever; incurred by or on behalf of any person or corporation whomsoever including the parties to this agreement, their agents, employees, representatives, successors and assigns, which may in any manner arise out of or be connected with, in whole or in part, directly or indirectly, my accompanying member of the Rock Springs Police Department while said officers are on duty pursuant to the privilege hereby granted.

First Name: _____ Last Name: _____

Phone Number: _____ D.O.B.: _____

Driver's License: _____ State: _____

Address: _____ Apt. _____

City: _____ State: _____

I do hereby certify that I am _____ years of age and my occupation is _____.

My reason for requesting this privilege is:

I do hereby certify that the information listed above is accurate and true.

Applicant's Signature: _____ Date: _____

Parent or guardian must sign the following if the applicant is under 18

I, **the below named**, being the parent or legal guardian of the above named minor applicant do hereby certify that I have carefully read and fully understand this application and do hereby consent to the applicant accompanying members of the Rock Springs Police Department while on general duty; and, I do further hereby agree to abide by and accept on behalf of myself and the applicant all the terms, stipulations, agreements, waivers, releases, and all other conditions contained herein.

Parent/Legal Guardian's Signature: _____ Date: _____

*****Department Use Only***** Department Use Only*****

Ride Along Approval

Date Approved: _____

Chief of Police/Commander: _____

Date: _____ Shift: _____ Shift Sergeant: _____

Ride Along Officer's Signature: _____