Hermiston Police Department
330 S. First Street
Hermiston, OR 97838-2360
Phone (541) 567-5519 • Fax (541) 567-8469

POLICE RIDE-A-LONG PROGRAM REQUEST FORM AND WAIVER

I, the undersigned, hereby request permission to ride in a police vehicle of the City of Hermiston, at such times and in such areas as may be approved by the Chief of Police or his designated representative. I understand that the police vehicle will be engaged in normal police patrol and law enforcement activities, some of which may be dangerous and expose passengers to risk or harm. I acknowledge this risk of harm and voluntarily accept it, hereby releasing the City of Hermiston, the Hermiston Police Department, the individual officers and employees of the City of Hermiston from any liability which might result from my participation in this program. I give permission to have my background checked for criminal history. I agree to the rules and instructions listed on the back of this form.

Signature of Applicant: _____ Date: _____

Note: Applicants under eighteen (18) years of age must have this form read and signed by their parents or guardian prior to any participation in this program. The ride-a-long program is open to persons who are at least 16 years of age.

PERMISSION OF PARENT OR GUARDIAN

I, the undersigned, being the parent or guardian of _____ hereby join with him/her in requesting permission for him/her to ride in a police vehicle as aforesaid and do join with him/her in granting a release and discharge to the City of Hermiston, the Hermiston police Department, the individual officers and employees of the City of Hermiston, as set out in detail above.

Signature of Parent or Guardian: _____ Date: _____

In case of emergency notify: _____ Phone: _____

PLEASE PRINT THE FOLLOWING REQUIRED INFORMATION

Full Name of Applicant:	**Phone Number:**	
Address:	**Email:**	
Drivers License/ ID Card #	**Date of Birth**	
Dates Preferred **1st** _____ **2nd** _____ **Actual Times Ride-a-long** _____	**Times Preferred** _____ _____ **Officer** _____	**I would like to ride with Officer:** **School Attending/Occupation**

Background Check: _____ **Date:** _____
Dispatcher's Signature

Application Approved: _____ **Date:** _____
Sergeant's Signature