

OFFICIAL USE ONLY

NO RECORD RECORD (Attached) CHECKED BY _____ DATE _____

**SCOTTSDALE POLICE DEPARTMENT
WAIVER OF LIABILITY**

(Please PRINT legibly)

FULL NAME _____ DATE OF BIRTH _____

ADDRESS _____ CITY/STATE _____

DAY PHONE _____ SOCIAL SECURITY NO. _____

REASON FOR RIDING _____

PREFERRED DATES AND TIMES TO RIDE _____

UNIT: PATROL POLICE AIDE DISPATCH CRIME SCENE SPECIALIST OTHER _____

E-MAIL ADDRESS: _____

PLEASE READ AND SIGN THE FOLLOWING:

In consideration of being permitted to be an observer/rider with the Scottsdale Police Department, and to the fullest extent permitted by law, I, _____, on behalf of myself, my representatives and heirs agree to defend, indemnify, and hold harmless the City of Scottsdale, its departments and any of its elected or appointed officials, officers, directors, commissioners, agents, employees, and/or volunteers (collectively referred to hereinafter as "City of Scottsdale") from and against any and all allegations whether known or unknown, demands, claims, proceedings, suits, actions, and damages, including, without limitation, property damage, environmental damages, personal injury, bodily injury and wrongful death claims, losses, expenses (including claim adjusting and handling expenses), penalties and fines (including, but not limited to, attorney fees, witness fees (including expert witnesses), court costs, and the cost of appellate proceedings), judgments or obligations, which may be imposed upon or incurred by or asserted against the City of Scottsdale by reason of, related to, arising from or out of, my being an observer/rider with the Scottsdale Police Department.

Proper attire must be worn, i.e., no grubby clothing, jeans, shorts, open-toe shoes. During the ride-along you are responsible for paying for your own meals and must provide your own transportation to and from the Police Department.

SIGNATURE OF OBSERVER _____ DATE _____

IF JUVENILE, SIGNATURE OF PARENT/GUARDIAN _____ DATE _____

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APPROVED BY: _____ DATE _____

DENIED (Reason) _____

DATE/DIST/SQUAD/SGT ASSIGNED _____

ASSIGNED EMPLOYEE: _____ BADGE # _____

THIS SECTION TO BE FILLED OUT BY ASSIGNED SPD EMPLOYEE

DATE OF RIDE _____ TIME OF RIDE: FROM _____ TO _____

ASSIGNED EMPLOYEE SIGNATURE _____ BADGE # _____

COMMENTS: _____

Please return completed form to PDHQ: Uniformed Services Bureau Secretary PD Personnel Unit



SCOTTSDALE POLICE DEPARTMENT RIDE-ALONG PROGRAM GUIDELINES

The Scottsdale Police Department maintains a ride-along program so that members of the community may become familiar with day-to-day police operations and to increase public awareness of the police function in the community.

Eligible citizens are those that are at least 14 years of age and meet at least one of the following requirements. If you do not meet at least one of these requirements, you are not eligible for the ride-along program.

1. Scottsdale resident
2. Scottsdale business owner
3. Scottsdale city employee
4. Scottsdale Police Explorer Post members
5. Scottsdale Police employee's relative or friend
6. Student of a Scottsdale school, including Scottsdale Community College
7. Applicants and potential applicants with the City of Scottsdale Police Department.
8. Employees of another police agency visiting from another city, state, or country
9. Citizen's Academy Participant (Ride-along will be scheduled through Academy Coordinator)

Patrol ride-alongs are scheduled for four hours.

No more than four ride-alongs a month for each squad will be scheduled.

Please allow a minimum of 72 hours for ride-along approval to be processed.

All ride-along applicants must successfully pass a background check in order to be approved for a ride-along. The Police Department reserves the right to disapprove any ride-along application with or without cause. Approved riders will be contacted via email with information as to when and where to report for the ride-along. Please contact the Uniformed Services Bureau Secretary at (480)312-1907 if you have any questions.

Completed applications can be returned to any Scottsdale Police Station, our Headquarters building at 8401 E. Indian School Rd., Scottsdale, AZ 85251, mailed in, or scanned and emailed to msanders@scottsdaleaz.gov.

RIDER RULES

- A. **Riders may not ride more than once every 6 months unless approved by a lieutenant.**
- B. **Riders that report to the ride-along and who appear to be sick or have an odor of alcohol or drugs will not be allowed to ride.**
- C. **Riders must wear clean, presentable attire or will not be allowed to ride.**
- D. **Riders must follow directions at all times.**
- E. **Any violation of these rules will subject the rider to termination of the ride and probable preclusion from future ride-alongs.**
- F. **Civilian riders must not bring any weapons with them on the ride-along.**
- G. **These rules are subject to change without notice at the discretion of the Chief of Police.**

****PARTICIPANT MUST SIGN WAIVER OF LIABILITY ON REVERSE SIDE****