

La Junta Police Department

Release Rider Request



R I D E R R E Q U E S T	Name (Please Print)		Date of Birth		
	Residence Address		Home Phone		
	Occupation and Business Address		Business Phone		
	Reason For Request				
	Date of Ride Requested		Reporting Time for Ride	Social Security Number	
	<i>Office Use Only</i>				

C O N D I T I O N S O F A U T H O R I Z A T I O N	<ul style="list-style-type: none"> Permission to ride will not be given to persons under eighteen (18) years of age unless a signed and notarized waiver is executed by the legal parent or guardian. Riders are expected to be clean and neat; the Watch Commander may cancel this permission to ride based on the appearance of the guest rider. The Watch Commander retains the right to cancel any ride along at any given moment if he/she has reason to believe that the rider has disregarded a direct order, refused to comply with officer's requests or in any other way knowingly endangered him/herself or the officers or hindered the officer's ability to complete police duties as required. Legal identification must be presented when applying for this authorization to ride in a La Junta Police Department vehicle. 			
	CAUTION: READ BEFORE SIGNING			
	<p>In consideration of my being permitted to ride in a motor vehicle owned by the City of La Junta, Otero County, Colorado, I hereby release the City of La Junta and any of its officials, agents, or employees from any and all liability for any damage or injury which I may receive while in a vehicle owned by the City of La Junta, as a result of my having been a passenger in a City owned vehicle or while in the company of the City official, agent or employee during the course of my requested ride along; both as to any right of action that may occur to myself, my heirs, and personal representatives.</p> <p>I have been made aware of the fact that all police activities, by very definition and execution, may and most likely shall involve some measure of personal endangerment. With this full understanding I hereby accept any and all risk associated with being granted the privilege of this ride along.</p> <p>I have read this release, I understand what the release means; I hereby indicated my voluntary acceptance of the terms of this release by the signing of my name below.</p>			
	DATE		SIGNATURE	

L J P D U S E	Clear – Records <input type="checkbox"/> YES <input type="checkbox"/> NO	Date: _____
	Clear – NCIC/CCIC <input type="checkbox"/> YES <input type="checkbox"/> NO	
	Cleared By: _____	Officer (s) Assigned To Rider: _____