

MIDDLEBURY POLICE DEPARTMENT

**RIDE ALONG REQUEST**

DATE: \_\_\_\_\_

**I. APPLICATION**

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

BEST TIME / DAY TO CONTACT: \_\_\_\_\_

I would like to ride-along with the Middlebury Police Department on \_\_\_\_\_  
(date) (times)

for the following reasons: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I HAVE READ AND SIGNED THE RELEASE FORM AND I UNDERSTAND THE PROVISIONS.

SIGNED \_\_\_\_\_  
(Applicant) (Parent / Guardian)

**II. AUTHORIZATION FOR MEDICAL TREATMENT**

I, \_\_\_\_\_ give consent to have my child,  
(parent / guardian)

\_\_\_\_\_, medically treated by health care professionals in the  
(child's name)

event my child is injured while participating in an activity associated with the Middlebury Police Department, and I am not present at the time of treatment.

SIGNED: \_\_\_\_\_ WITNESSED BY: \_\_\_\_\_

HEALTH / ACCIDENT INSURANCE CARRIER \_\_\_\_\_ POLICY #: \_\_\_\_\_

[SEE REVERSE]

**MIDDLEBURY POLICE DEPARTMENT  
RELEASE AND WAIVER**

KNOW ALL PERSONS BY THESE PRESENT, that I, \_\_\_\_\_, on my own behalf and on behalf of my heirs, next of kin, executors, administrators, estate agents and assigns, and representatives of any nature whatsoever, for an in consideration of the authorization and permission to accompany officers or any officer of the department during the course of their or his duties, which has been granted to me at my voluntary request, after having been fully advised of the potential hazards of such activity or activities, do hereby WAIVE AND RELEASE all demands, damages, actions, causes of action, suits and claims of any nature whatsoever, whether in law or in equity, that I or my heirs, next of kin, executors, administrators, estate agents and assigns, and representatives of any nature whatsoever might otherwise have against the town, the police department, and each and every officer, official, member, employee, agent and attorney thereof and therefore, and his or her heirs, next of kin, executors, administrators and estate, on account of my death or injuries, both to person and to property, whether foreseeable or not, which may occur, directly or indirectly, or develop at anytime in the future as a result of my activities or association with the police department, whether in a police vehicle, in the police station, or otherwise associated with the police department.

It is expressly agreed and understood that this WAIVER AND RELEASE shall apply for the express purpose of precluding forever all claims, suits, demands, damages, and causes of action that I or my heirs, next of kin, executors, administrators, estate agents and assigns, and representatives of any nature whatsoever might otherwise assert against any of the aforesaid parties as a result of my association and activities with the police department during:

\_\_\_\_\_.

I hereby declare that the terms of this WAIVER AND RELEASE have been fully read and understood by me, and freely and voluntarily entered into and accepted by my, and I hereby acknowledge receipt of a copy of this agreement.

In further consideration of the aforesaid authorization and permission granted to me to accompany an officer or officers of the police department at my own request, I hereby promise and agree to fully comply with all instructions given to me for the purpose of protecting my personal safety and that of my property.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature (Parent / Guardian)

\_\_\_\_\_  
Signature (Ride-along Applicant)

This waiver not valid unless signed by the Chief of Police

\_\_\_\_\_  
Thomas Hanley, Chief of Police

\_\_\_\_\_  
Date