YOLO COUNTY SHERIFF'S DEPARTMENT
APPLICATION FOR CITIZENS RIDE-ALONG

2500 E. Gibson Road
Woodland, California 95776
(530) 668-5280

PLEASE PRINT OR TYPE

Name:_____Address:_____
City:_____State:_____Zip Code_____Date of Birth___/___/___
Driver's License No._____Business Phone:_____ Home Phone:_____
Occupation:_____Employer:_____

Have you ever been arrested (If Yes, please explain): ☐Yes ☐No

_____

Are you currently a restrained person on a valid court order: ☐Yes ☐No
Have you ever been or are you currently on Probation or Parole: ☐Yes ☐No

Answering yes to any of the above questions may result in a denial for a ride-a-long.

Check Box
Day of week you wish to ride: ☐Sun ☐Mon ☐Tue ☐Wed ☐Thur ☐Fri ☐Sat
Preferred Shift: ☐6 am to 10 am ☐ 2 pm to 6 pm ☐ 10 pm to 2 am

WAIVER AND RELEASE OF ALL CLAIMS FOR PERSONAL INJURY AND PROPERTY DAMAGE

I, _____ am ☐Under ☐Over the age of eighteen years and at least sixteen years of age with parental permission and not being a member of the Yolo County Sheriff's Department, have made a voluntary request to ride as a guest in a vehicle assigned to the Yolo County Sheriff's Department during the performance of their official duties. I also understand that I may ride once every six (6) months, unless the Division Commander has granted special permission.

As a citizen on the Ride-Along Program I understand I will be required to dress appropriately for existing weather conditions. No apparel or special equipment will be provided to participants by the department. As a participant I will dress neatly. I will not wear sandals t-shirts, halter-tops, or shorts. For summertime ride-along with the Boat Patrol, conservative shorts, soft soled shoes and conservative tops may be worn.

All Citizen Observer/Ride-Along will be expected to comply with the following rules as well:

- Do not engage the deputy in excessive conversation to the point of impairing the deputy's performance.
- Refrain from telling the deputy on how to perform their duties.
- Remain in the vehicle or watercraft unless the deputy approves exiting.
- Do not carry weapons or firearms, cameras, tape recorders, portable radios, or any device that may distract the deputy from his/her duty. This includes those individuals who possess a valid Concealed Weapons Permit. This includes all peace officers unless approval from a supervisor has been given.
- Refrain from using the Sheriff's Department equipment.
- Keep all information confidential concerning investigations and arrest.

- Following all instructions given by the deputy.

I, therefore, in consideration of the privilege of participating in the Yolo County Sheriff's Citizens Ride-Along Program, do hereby waive, release, and forever discharge the County of Yolo, the Yolo County Sheriff's Department, and any officer, employee, servant or agent of each, or their successors, heirs, executors, administrators, or assigns, from and against any and all claims, suits, demands, and/or liabilities of whatever kind or nature, including attorney's fees, which arise out of their liability for causing any injury or damages which may have been sustained as a result of my participation in the Citizens Ride-Along Program.

This waiver and release includes all injuries and/or damages, whether know or unknown, foreseen or unforeseen, and whether they are latent or occur later as a result of the activities set forth above. This waiver and release is a general release, and is expressly made with knowledge of and a waiver of reliance on, the provisions of ' 1542 of the California Civil Code, which provides as follows:

> A general release does not extend to claims, which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor.

I have read this release and understand the terms used in it and their legal significance. I have executed this release voluntarily.

Dated:_____ _____

Signature

_____

Parent's Signature if Under 18

I have been advised and am aware of the possible dangers associated with this Ride-Along.

Dated:_____ _____

Signature

_____

Parent's Signature if Under 18

FOR DEPARTMENTAL USE ONLY

☐ APPROVED ☐ DISAPPROVED Reason for Disapproval: _____

_____

_____ _____

SUPERVISOR'S SIGNATURE OFFICER ASSIGNED RIDE-ALONG

_____ _____

DATE ASSIGNED TO DEPUTY DATE INDIVIDUAL RODE