

LORAIN POLICE DEPARTMENT

100 West Erie Avenue
Lorain, Ohio 44052-1646
PH: (440) 204-2103 FAX: (440) 204-2519



James McCann, Chief of Police

PUBLIC SERVICE WITH HONOR

LORAIN POLICE DEPARTMENT RIDE-ALONG APPLICATION

Name (Print) (Date)

Signature

Address, include City/State

Home Phone Email

Date of Birth Age Sex Social Security #

To your knowledge, do you have any physical impairment? *Circle:* Yes No

If yes please specify:

In case of emergency, please notify:

Name (Relationship)

Home Phone Work Phone

Day/Time Preference (not guaranteed) for ride-along: _____

Provide a reason why you are applying for this ride-a-long.

College or University attending/attended? _____

Major or program of study? _____

**LORAIN POLICE DEPARTMENT
RIDE-ALONG APPLICATION**

DEPARTMENT USE ONLY

Criminal Record Check conducted by: _____

Circle one: No Record Record Attached

Applicant Notified By: _____

Date and Time of Scheduled Ride: _____

Approved by: _____

Disapproved by: _____

Assigned to Ride With: _____

Platoon Supervisor Signature _____

Host Officer Signature _____

Upon completion of ride-along-application and release shall be returned to the office of the Operations Captain.

LORAIN POLICE DEPARTMENT RIDE-ALONG PARTICIPANT INFORMATION SHEET

1. All applicants for participation in this program must be approved by the Chief of Police or Operations Captain.
2. Anyone wishing to participate in this program must complete an application and present valid photo identification upon turning the application in to the Police Department.
3. The review of all applications will include a criminal record check as well as an NCIC inquiry. An applicant who has a felony record **or** a misdemeanor record may be excluded from participation in this program.
4. Once approved, participants shall be notified of their ride-along date and time. Note, if a participant is not available for the assigned ride-along **(date and time)**, he or she can schedule an alternate date with the officer who scheduled the original ride.
5. Participants should arrive at the station at least 15 minutes prior to their scheduled ride-along. If the participant is not present at this time, the department reserves the right to cancel the ride-along rather than delay the officer from going on duty while necessary forms are completed.
6. Participants will fully review the release and indemnification form with the host officer.
7. Once this form is signed, the participant will be issued a ride-along participant identification card which will be worn on the outermost clothing during the entire ride-along. This identification card shall be turned in to the host officer at the end of the ride-along.
8. Participants shall play no active role in the police function. They must only act as an observer unless otherwise directed by their host-officer.
9. Participants shall not be allowed to operate any police equipment unless directed to do so by a police officer in an extreme emergency.
10. Participants must remain in the police vehicle at all times until directed otherwise by the host officer.
11. Participants must not speak to victims, witnesses, prisoners or other persons associated with a police event. Should a witness, prisoner, victim or other person speak to the participant, the participant should politely direct the person to speak to one of the officers present.
12. Participants are encouraged to ask questions of the host officer. However, such questions should be asked after the police event has been resolved so as not to interfere with the police operation.
13. Participants shall not bring cameras or any recording devices without the express written permission of the Chief of Police or Operations Captain (excluding media).

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14. Participants shall follow the instructions of the host-officer at all times during the ride-along.

15. Participants shall not be allowed to carry any firearm or other weapon, even when otherwise authorized by law, while participating in the ride-along program.

17. Participants should be dressed in comfortable, casual but conservative clothing during the ride-along. (pants and shirt/jacket for men, pants and blouse/jacket for women) Participants who are inappropriately dressed, as determined by the supervising officer, shall not be allowed to participate in the program on the assigned date.

18. Participants shall only be allowed to participate in this program once every calendar year unless given written authorization from the Chief of Police or Operations Captain.

I acknowledge that I have read and understood the above Information Sheet and agree to comply with its provisions at all times while participating in any ride along.

Dated this _____ day of _____, 20____.

Ride along signature

Witness

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Cel Rivera, Chief of Police

PUBLIC SERVICE WITH HONOR

Lorain Police Department Release and Indemnity Agreement

I, _____, acknowledge that I have requested permission from the Lorain Police Department to participate in the Department's "Ride-Along" program.

- I acknowledge that the ride-along program involves accompanying a police officer who is in the performance of his or her duty as a police officer.

- I have been advised of the various dangers which I may be exposed to during my participation with this program.

-I have been specifically informed of the fact that police vehicles are sometimes required to operate in an emergency fashion which may expose me to danger.

- I also acknowledge that I have been advised of the fact that while accompanying an officer I may be exposed to danger to both my person and my personal property due to the actions of criminal suspects, prisoners, and other persons that I may come into contact with during my ride-along.

NOW, THEREFORE, having been fully advised of the dangers inherent in the ride-along program in which I request to participate, and in consideration of the privilege granted to me by the City of Lorain to be a gratuitous passenger in a police car, I do hereby, for myself, my spouse, heirs, executor or administrator, assigns and personal representatives:

1. Assume full responsibility for any personal injury, death or any damage to my personal property which may occur directly or indirectly, while in, or about any such police department vehicle, and all of the Lorain Police Department's facilities to include any other Department or City Facility I may enter during the ride-along.
2. Assume full responsibility for any personal injury, death or any damage to my personal property while accompanying any police officer of the City of Lorain in the performance of their duties.
3. Fully and forever release and discharge the City of Lorain, its police officers, employees, agents and servants, from any and all claims, demands, damages, rights of action, or causes of actions, present or future, whether the same be known or unknown, anticipated or unanticipated, resulting from or arising out of my being in, on or about any such Lorain Police Department vehicle, or at any or all police department premises or facilities, or while accompanying a police officer who is in the performance of his or her duty as a police officer for the City of Lorain.
4. I agree to indemnify and hold harmless the City of Lorain, its police officers, agents, employees and servants, for any acts or conduct on my part of whatever kind or nature whatsoever, while in, on or about any such Police Department vehicle, or at any or all Police Department premises or facilities, or while accompanying a police officer who is in the performance of his or her duty as a police officer for the City of Lorain.

**Lorain Police Department
Release and Indemnity Agreement Continued**

5. I agree to defend and to pay any attorney's fees or associated costs as a result of any claim or action brought by or against the City of Lorain, its police officers, agents, employees and servants, for any acts or conduct on my part of whatever kind or nature whatsoever, while in, on or about any such Police Department vehicle, or at any and all Police Department premises or facilities, or while accompanying a police officer who is in the performance of his or her duty as a police officer for the City of Lorain.
6. I agree that it is my intent, having read and having been fully informed of all of the above that this Release and Indemnity Agreement be in full force and effect at any time after the execution hereof and cannot be extinguished or modified after its execution and delivery to the City of Lorain.

Name (Print)

Signature

Address

Telephone Number

Dated at the City of Lorain, Ohio, this ____ day of _____, 20____, at ____ o'clock

Witness:

Name (Print)

Signature

I, Parent or legal guardian of the above mentioned juvenile, do hereby give permission to have my child participate in the Ride-Along Program with the Lorain Police Department and agree to the above mentioned conditions.

Name (Print)

Signature

Address

Telephone Number

Dated at the City of Lorain, Ohio, this ____ day of _____, 20____, at ____ o'clock

Witness:

Name (Print)

Signature