

**ST. ANTHONY POLICE DEPARTMENT  
CANDIDATE RIDE-ALONG RELEASE, NON-DISCLOSURE  
AND INDEMNITY AGREEMENT**

WHEREAS the undersigned has voluntarily elected to ride as a passenger in a Police Department vehicle of the City of St. Anthony, Minnesota and to accompany Police Officers of said City while engaging in the performance of their duties, to study and observe for his/her own benefit the functions and operations of the St. Anthony Police Department and its personnel; and

WHEREAS the undersigned desires to do so at his/her own risk and recognizes the possible and inherent danger to his/her person and property resulting there from; and

WHEREAS the City of St Anthony does not wish to be liable for any damages arising from personal injuries and/or property damage sustained;

NOW, THEREFORE, in consideration of the premises and other good and valuable consideration, the undersigned does hereby for himself/herself, his/her wife/husband, heirs' executor or administrator and personal representatives:

- A. Agree to refrain from disclosing to a spouse, parent, friend or any other individual information of any nature that the undersigned may obtain through his/her observation of the Police Department;
- B. Assume full responsibility for any personal injury or damage to his/her person or property which may occur, directly or indirectly while in, on or about any such Police Department vehicle, the Police Department premises or any part thereof, at the St. Anthony City Hall, St. Anthony City Garage and all other City -owned property or while accompanying any Police Officers of the City of St. Anthony while in the performance of their duties;
- C. Fully and forever release and discharge the City of St Anthony, its agents and employees from any and all claims, demands, damages, rights of action or causes of action, present or future, whether the same be known, anticipated or unanticipated, resulting from or arising out of the undersigned's being on or about any such Police Department vehicle or at any or all of the premises and places aforesaid or while accompanying any Police Officer of the City of St Anthony as aforesaid;
- D. Indemnify and hold harmless the City of St Anthony, its agents and employees for any acts or conduct of the undersigned of whatever kind or nature whatsoever while in, on or about any such Police Department vehicle or at any or all of the premises and places aforesaid or while accompanying any such Police Officer as aforesaid or disclosing at any time or place information learned while observing the operation of the St. Anthony Police Department;
- E. Agree to defend and to pay any costs or attorney's fees as a result of any action brought by or against the City of St Anthony, its agents and employees for any acts or conduct of the undersigned of whatever kind or nature whatsoever while in, on or about any such Police Department vehicle, or at any or all of the premises and places aforesaid, or while accompanying any such Police Officer as aforesaid or disclosing at any time or place information learned while observing the operation of the St. Anthony Police Department;
- F. State that he/she is as of the date of the execution hereof, the age of eighteen (18) years or older; or that he/she is under eighteen (18) years of age and that his/her parent/guardian has agreed and explained the terms of this agreement to him/her; and;
- G. Agree that it is the intent of the undersigned that this Ride-Along Release, Non-Disclosure and Indemnity Agreement be in full force and effect at any time after the execution hereof.

Initials of Civilian Rider

Initials of Parent or Guardian  
(If rider under 18 years of age)

## CANDIDATE RIDE-ALONG RELEASE, NON-DISCLOSURE AND INDEMNITY AGREEMENT

FULL NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
(First-Middle-Last Name)

ADDRESS: \_\_\_\_\_ RACE: \_\_\_\_\_ SEX: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

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

DATE/TIME REQUESTED FOR RIDE-ALONG: \_\_\_\_\_

I certify that I have read and understand the Release/Non-Disclosure and Indemnity Agreement and the information that I have provided is true and correct:

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

### \*\*\*\*\*IF UNDER 18 YEARS OLD, PARENT/GUARDIAN MUST COMPLETE BELOW:\*\*\*\*\*

As parent/guardian of \_\_\_\_\_, I hereby state that I have read this agreement and explained its terms to my child. I hereby accept this agreement on behalf of my child and on my own behalf. I agree that all references to agreements or statements of the volunteer shall be considered to be references to me as well as my child and that for purposes of this agreement, I shall also be considered a volunteer..

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

POLICE WITNESS: \_\_\_\_\_

OR NOTARY: \_\_\_\_\_

### \*\*\*\*\*POLICE SUPERVISOR COMPLETES\*\*\*\*\*

Permission is hereby granted to the person named herein, and whose signature is affixed above, to be a passenger in a St. Anthony Police Department vehicle as follows:

Date/Time Ride Along Begins: \_\_\_\_\_ @ \_\_\_\_\_ hours

Date Time Ride-Along Ends: \_\_\_\_\_ @ \_\_\_\_\_ hours

Open-ended ride-along approval. To be renewed January 1 of each year.

Approved by: \_\_\_\_\_, DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

### \*\*\*\*\*OFFICER COMPLETES\*\*\*\*\*

Actual Time Ride-Along Began: \_\_\_\_\_ Actual Time Ride-Along Ended: \_\_\_\_\_

ICR #: \_\_\_\_\_

### \*\*\*\*\*OFFICE STAFF COMPLETES\*\*\*\*\*

Clear warrants (Hennepin/Ramsey)       Clear CCH       Clear MINCIS/NCIC  
 Local Check