Mail or Email to: Santa Cruz Police Department 155 Center Street

Santa Cruz, CA 95060 Attn: Kelsey Crowe

kcrowe@cityofsantacruz.com



Police Department

Ride Along

You have the opportunity to observe the Santa Cruz Police Department at work. Our Ride-Along program allows you to observe a team of Officers, CSO's and Rangers at work on patrol. You will experience the ways in which different law enforcement situations are handled and gain a better insight into the daily operations of the Department. One of our goals is to improve communication between patrol personnel and the community. We believe this goal can be met through active citizen involvement in programs such as this. We hope your experience will help you share new information and ideas with your neighbors and friends. We appreciate your interest in the Ride-Along program and encourage your participation.

Conduct

- Participants must remain in the vicinity of the patrol vehicle and should not accompany the officer outside that area unless specifically instructed to do so.
- Participants cannot touch or attempt to operate any vehicle or communications equipment without explicit authorization from the officer.
- Participants may observe situations or occurrences during the ride-along that may require them to submit a written declaration and/or testify in court.

Dress Code

Participants should wear comfortable and appropriate clothing. Approval to ride-along will be denied if the participant has been drinking or under the influence of a controlled substance. Firearms or other weapons are not permitted for any reason.

Accident Waiver

There is some degree or risk involved by the nature of law enforcement activities. The participant assumes any and all risks to which she or he may be exposed to during the ride-along.

Please complete the information on the reverse side

OFFICE USE ONLY:			
Team Comm/Shift Sgt. Approved Disapproved			
Ride-Along Date Shift Time			
Name, ID# of Ride-Along Officer			
Records Check – By/ID			
No Record See Attached Printout			

Please complete all the following in	formation: Date:	
Full Name:		-
Date of Birth:	Birthplace:	
Driver's License or ID #:	Please attach a copy of your valid	DL
Home Address:		
Home Phone:	Business Phone:	
Business Address:		-
Occupation:		_
Emergency Contact:	Relationship:	
Phone:		
Reason for Participation:		
Last time you participated on a ride a	along with SCPD:	
EMAIL ADDRESS:		
Ride-Along tours are 2-4 hours in	length. Please select which shift you would prefer Ride-Along Schedule	
Ride-Along participants may be sche	<u> </u>	
7:30am - 5:30pm	udled off offe of the following stiffts.	
4:30pm - 2:30m		
	(Minimum age for this shift is 18)	
10.30pm - 8.00am	(Millimum age for this shift is 10)	
Preferred Officer:		
Participants are limited to one ride	per year. Minimum participant age is 14	
Dood the following decument comple	ataly hafara signing	
Read the following document comple	Damage Waiver & Release of Claims	
	er/his estate and/or heirs shall hold harmless the City, its officers, e	mnlovees and
	l expenses (including attorney's fees) and causes of actions of whats	
	be subjected to on account of loss or damage to property and loss o	
· · · · · · · · · · · · · · · · · · ·	ne undersigned arising while a guest or observer in any Santa Cruz P	
	panying a member of said Department during the active performance	
duties as a peace officer.	anying a member of said Department daring the delive performance	e or ornerar
Signature	Date	
(Signature indicates you approve and	Date d understand the above agreements)	
NOTE: The signature of a parent or guard	dian is required below for those citizens under minimum age of eighteen (1	l8) years.
Form must be signed in the presence of	a Police Department employee.	
Parent or Guardian:		
Address:		
Telephone:		
Signature	Date	Form
	No. 09	6 (October 2019)