



Battle Ground Police Department

507 SW 1st Street • Battle Ground, WA 98604 • (360) 342-5200 • Fax (360) 342-5201

Citizen Ride Along Request Form

Name (Last, First MI)	Date of Birth
Address	Phone Number
Social Security Number	Previous Ride Along? <i>If yes, when?</i>
Reason for Request	
Date/Time Requested for Ride Along	

Understanding of Rules, Assumption of Risk, and Waiver:

I, _____, hereby request permission to ride as a guest of the Battle Ground Police Department in a vehicle owned by the City of Battle Ground to permit my observation of police work. No payment has been requested or will be given to the Battle Ground Police Department or its agents should permission be granted. I will be observing police work totally at my own risk and I am willing to assume all risks involved including the risk of death or serious injury. I also understand that in the event the vehicle in which I am riding becomes involved in a pursuit, I may be directed to exit the vehicle regardless of time of day or location and I am willing to assume all responsibility for my transportation back to the Battle Ground Police Department or to my residence and for any and all harm that may befall me once I exit from the Battle Ground Police Department vehicle.

In consideration for granting my request to ride and observe, and being fully aware of the risks involved, I hereby waive any and all rights I have or may have in the future to bring any claim or lawsuit against the City of Battle Ground and its Police Department, individual officers, or any other employees, officers, or agents of the City arising out of or connected with observing the activities of the Battle Ground Police Department. I also agree and understand that the Battle Ground Police Department will conduct a records check of criminal history as a result of this application. No person under 18 years of age is permitted to participate in the ride along program without permission of a parent/guardian. The minimum age to participate in the program is 16 years of age.

Further, I understand that I must be dressed in proper attire and no T-shirts, sweat pants, or shorts are allowed to be worn while riding in a Battle Ground Police Department vehicle. I understand that I am responsible of my own meal expense and that if I fail to adhere to the conditions of the ride along program, or impede in the duties of the host officer, my privilege to ride will be immediately revoked.

Signed: _____ Date: _____

Parent/Guardian: _____ Date: _____

Ride Along Orientation and Rules:

1. This form has been signed by the rider.
2. The Ride Along Security Awareness Acknowledgement for Non-Criminal Justice Personnel has been reviewed with the rider and signed.
3. The rider has received instructions on use of the patrol radio.
4. The rider knows how to open the trunk of the patrol car.
5. The rider knows the location of the first aid kit, fire extinguisher, and flares.
6. The rider has been instructed to remain in the patrol vehicle.
7. The rider will wear the seat/shoulder belt at all times.
8. The rider will not engage any violator or prisoner in conversation except for general courtesies.
9. The rider has been informed that if the officer is dispatched to a known dangerous situation, the rider may be dropped off at a safe location prior to the officer going to the call.
10. If the officer encounters resistance from a violator, the rider's responsibility is to solicit assistance via the radio and to take all necessary measures for self-protection.
11. The rider shall obey all commands given by the officer.
12. CRESA has been advised of the rider's presence.
13. The rider may not have any weapons in his or her possession during the ride along.
14. The rider may not take any photos, videos, or recordings of any kind during the ride along.

Date Ride Along Completed: _____ Start and End Time: _____

Officer's Signature and PSN	Date	Rider's Signature	Date
Internal Use Only			
<input type="radio"/> Approved	<input type="radio"/> Denied	Initials: _____	Date: _____ Assigned to Ofc: _____

Ride Along Security Awareness Acknowledgement for Non-Criminal Justice Personnel

I, _____, have read the following, or have had it read and explained to me, and understand and agree that:

- Participation in the ride along program at Battle Ground Police Department will require me to be present in areas where Criminal Justice Information (CJI) may be seen or heard. I realize this information is sensitive in nature and will not discuss or reveal any CJI to **anyone**.
- CJI refers to state and federal criminal justice data, which may include case/incident information, identity information (including fingerprints and other forms of biometric data), and property (such as vehicle or firearm) data.
- Access to, or use of, CJI (such as viewing, reading, copying, or sharing) is strictly limited to official purposes, specifically the **administration of criminal justice**.
- The term "administration of criminal justice" is defined by RCW 10.97.030(1), as follows:
 - "The administration of criminal justice" means performance of any of the following activities: Detection, apprehension, detention, pretrial release, post-trial release, prosecution, adjudication, correctional supervision, or rehabilitation of accused persons or criminal offenders. The term also includes criminal identification activities and the collection, storage, dissemination of criminal history record information, and the compensation of victims of crime.
- Because I have no responsibility or authority for handling CJI, I will not access, use, view, copy (including taking photos and/or audio/video recordings), disseminate, or disclose (in writing or in conversation) CJI, nor will I take part in the physical destruction of CJI. I am aware that doing so would be considered misuse of CJI.
- I further understand that misuse of CJI is not limited to situations in which the CJI is used by me or others for purposes or in a manner that could be punished under the criminal laws of Washington State or of the United States.
- I understand that I must be escorted by department personnel at all times while in secure areas, and that I may be asked to wait in non-secure locations at the officer's discretion.

I have read and understand the information above regarding the importance of protected CJI, and have asked and received a satisfactory answer to any questions I had concerning the above statements.

Signature: _____ Date and Time: _____