



CIVILIAN RIDE-ALONG APPLICATION

Full name: _____ Sex: ___ Race: ___ Date: _____

Social security number: _____ Date of birth: _____

Home address: _____ City: _____ State: ___ Zip: _____

Home phone: _____ Cell phone: _____ Email: _____

Place of employment: _____ Address of employment: _____

1) Have you ever been arrested/convicted of any offense? Yes No If yes, please state the offense, location, date: _____

2) To your knowledge do you have any physical impairment or condition, including pregnancy, which would limit your participation in this program? Yes No If yes, please list: _____

3) Have you participated in this program before? Yes No If yes, when: _____

Please indicate the day of the week and time you want to ride along:

1st Preference: DAY: _____ TIME: _____ 2nd Preference: DAY: _____ TIME: _____

I, _____ Residing at _____ Agree to the Following:

1. I understand that there is a degree of risk involved in my participation in this program. With this in mind I do wish to proceed with the Civilian Ride-along.
2. I understand that I am under the direct supervision of the officer with whom I am riding and will in no way hinder the officer from the performance of his/her duties.
3. I understand and agree to adhere to all the departmental policies, rules, and regulations concerning the Rock Hill Police Department Ride-along Program.
4. I hereby waive, release and/or covenant not to sue for myself, my heirs, executors, administrators or assigns, any and all claims, demands, actions, against the City of Rock Hill, South Carolina, its officers, agents and employees, of whatever kind or nature may arise in any manner by reason of injury or damage to my person or property or both while I am riding in Rock Hill Police Department vehicles, observing any operation, or participating in this program in any other manner.
5. I further agree to hold harmless the City of Rock Hill, South Carolina, its officers, agents and employees for any injury including property damage or personal injury to any third party arising in any manner out of my participation in this program.
6. This agreement holds harmless the City of Rock Hill, South Carolina, its officers, agents and employees for any injury, including but not limited to claims for wrongful death, arising in any manner to me while participating in this program.
7. I further agree to allow the Rock Hill Police Department to run a criminal history check as outlined in General Order # 03.99.30.
8. **I HAVE READ THE FOREGOING WAIVER, RELEASE, AND COVENANT NOT TO SUE AND UNDERSTAND THAT IT CONSTITUTES A FORMAL LEGAL DOCUMENT.**

Signature of Participant Date: _____

Signature of Witnesses Date: _____

**CIVILIAN RIDE-ALONG PROGRAM
CONDITIONS OF PARTICIPATION**

1. Participation in this program is a privilege and courtesy extended by the Rock Hill Police Department. RHPD reserves the right to modify, control, deny, or cancel any ride-along at any time.
2. Participants are required to present a neat and clean appearance. Citizens expect as much from their police officers and participants in the program are required to meet the same standard. Business casual attire is preferred – no jeans, shorts, sandals, or clothing that is inappropriate for the existing weather conditions. RHPD reserves the right to judge the reasonableness and propriety of appearance.
3. Each participant is under the direct control of the officer to whom assigned. An officer who experiences difficulty with a participant will discharge the participant at the lobby of the Law Center and notify the Patrol Team Supervisor on duty. In those cases, the officer will explain the circumstances to the supervisor.
4. Participants will:
 - a. Be at least eighteen (18) years old.
 - b. Be of good character with no convictions for felonies/crimes involving moral turpitude.
 - c. Not have previously participated in the Ride Along Program.
 - d. Turn the ride-along application in at least two (2) weeks before their preferred ride-along date.
5. Participants will not:
 - a. Be permitted to carry any type of weapon unless the participant is a certified SC law enforcement officer.
 - b. Interfere in any way with the officer's performance of duties.
 - c. Be allowed to use cameras and/or recording devices with specific written permission by the Chief of Police or his designee.
6. Participants may:
 - a. Be required to serve as a witness in a court proceeding.
 - b. Be required to assist an officer upon his or her request and only under extreme emergency circumstances. In most cases, this would involve contacting Communications Center personnel by radio and requesting assistance.
7. Participants may be required to remain in the patrol vehicle while the officer is out on a call. On most types of calls, the officer may permit the participant to exit the vehicle and observe.
8. If a participant is already an employee of the Rock Hill Police Department, their supervisor's approval must be obtained before participating.

I HAVE READ AND UNDERSTAND THE ABOVE CONDITIONS OR PARTICIPATION AND AGREE TO THEM.

Participant Signature

Date

Participant's Supervisor (Only for RHPD Employees)

Date

Request: ___ Approved ___ Disapproved

_____ Date: _____
Professional Standards Supervisor