

TOWN OF LA CROSSE POLICE DEPARTMENT

RELEASE OF LIABILITY AND AGREEMENT FOR CITIZEN RIDE-ALONG PROGRAM

I, the undersigned;

In consideration of being permitted to ride in a motor vehicle of the Town of La Crosse, Virginia Police Department, I hereby release and agree to hold harmless the Town of La Crosse, its employees and agents from any and all liability for any damage, injury, illness or disease I may receive or contract while accompanying a Town of La Crosse Police Officer, from any cause whatsoever.

This release of liability and agreement given by me to the Town of La Crosse, its employees and agents shall apply to any rights of action that might accrue to myself, my heirs and my personal representative. Further, I agree to assume all risk riding in a Town of La Crosse Police Department Vehicle and in accompanying its officer(s) and am fully aware personal danger may be involved. Furthermore, I know and understand that I face possible exposure to certain diseases, including, but not limited to, Hepatitis B Virus, Human Immunodeficiency Virus (HIV), and Tuberculosis. My signature below indicates that I have read the above, understand its contents and agree to its terms and conditions;

I have been vaccinated for the Hepatitis B Virus: Yes No

Signature of Applicant _____

DATE

Personally appeared before me the signed, who says that he/she has executed the above instrument of his/her own free will and accord, with full knowledge of the purpose thereof,

Commonwealth of Virginia Notary Public

My commission expires:

Reason for request to ride: _____

Name (First, Middle, Last): _____

Social Security Number: _____

Home Address Street, City, County, State): _____

Home Telephone # _____ Work Telephone # _____

Date of Birth: _____ (MM/DD/YY) Occupation: _____

Emergency Contact Information: Name: _____

Telephone: _____

Relationship: _____

Records Check Complete: Yes Date: _____ Completed By ID#: _____

Chief of Police Final Decision:

Approved Disapproved

Chief of Police Date

Letter Sent to Participant _____ (DATE)