

**GROVE CITY POLICE DEPARTMENT
CITIZEN RIDE-ALONG PROGRAM**

REQUEST FOR PERMISSION TO RIDE RELEASE

I understand permission to ride in a Grove City Police vehicle is a privilege, not a right. As a condition to this privilege, I agree to:

- * conduct myself in a professional manner; not to interfere with the officer; or, the performance of his/her duty;
- * be dressed and groomed in a manner not to detract from the professional image of the Division of Police; and
- * agree that a personal record check investigation may be conducted.

Name _____

Address _____

Phone (home) _____ (work) _____

Social Security Number _____ DOB _____ Sex _____

Occupation _____

Reason for request _____

Date/Time requesting to ride _____

Signature

For Administration Use Only

CCH _____

Traffic Record _____

Approved _____

Disapproved _____

Assigned to: _____

Date

Sub-Division Lieutenant

RELEASE

KNOW ALL MEN BY THESE PRESENCE, that I, _____
for myself, my heirs, executors, administrators and assigns in consideration of the sum
of one dollar (\$1.00) and other valuable consideration, forever discharge all members
and employees of the Grove City Division of Police, City of Grove City, and State of Ohio,
from any and all actions, causes of action, claims, charges, demands, complaints,
damages, injuries, costs, loss of service, expenses and compensation on account of or
arising out of or resulting from an incident occurring during a period of time
commencing on the _____ day of _____, 20____, and
terminating on the _____ day of _____, 20____,
while riding in a cruiser operated and owned by the City of Grove City, Division of Police,
or, while participating in any incident with any member or employee of the Division of
Police, City of Grove City, which arises out of or results from my experience of riding in a
Grove City Police Division cruiser and I do hereby covenant with all members and
employees of the Grove City Division of Police, the City of Grove City, and State of Ohio
to indemnify and save them harmless from all actions, causes of action, claims, charges,
demands, complaints, damages, injuries, costs, loss of services, expenses and
compensation on account of or arising out of, or resulting from the aforesaid incidents
from the date of these presence.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of
_____, 20_____.

Signature

Parent/Guardian

WITNESSES:

Sergeant _____

Officer _____