



POLICE DEPARTMENT

Protect and Serve

**CITY OF WEST BEND POLICE DEPARTMENT
WAIVER OF LIABILITY / INDEMNITY AGREEMENT**

Name of Participant: _____

Address: _____

Phone Number: _____ Age: _____ Date of Ride Along: _____

Type of Project or Program: _____

I, (*choose one*)

_____, certify that I am freely and voluntarily participating in a Ride Along with the West Bend Police Department.

-- or --

_____, as parent or legal guardian of the above-named participant who is under the age of 18 ("Child"), hereby freely and voluntarily grant permission for Child to participate in a Ride Along with the West Bend Police Department.

I understand that the Ride Along may include, but is not limited to, riding in vehicles owned by the West Bend Police Department, observing police officers working, and educational training or activities at the police station or at other locations. I acknowledge that the Ride Along is a potentially dangerous endeavor and I agree / have instructed Child (**strike one**) to abide by all instructions provided by members of the West Bend Police Department before, during, and after the Ride Along. I also understand that it is possible that unforeseen or unexpected dangers could arise during the Ride Along that may cause injury to me / Child (**strike one**).

As material consideration to the West Bend Police Department for allowing me / Child (**strike one**) to participate in the Ride Along, and without which the West Bend Police Department would not give its consent, I hereby assume responsibility for any and all damage or injury that occurs personally to me / Child (**strike one**) or my property during the Ride Along. I shall defend and hold the City of West Bend, the West Bend Police Department, and all employees, directors, and agents thereof and their insurer(s) (hereinafter referred to collectively as "the City") harmless from and indemnify the City against any and all causes of action, liabilities, claims, demands, losses, damages, lawsuits and any expenses incidental to the defense thereof arising, either directly or indirectly, from my / Child's (**strike one**) participation in the Ride Along.

I HAVE READ THIS WAIVER OF LIABILITY / INDEMNITY AGREEMENT AND UNDERSTAND THE TERMS USED IN IT AND THEIR LEGAL SIGNIFICANCE. THIS WAIVER OF LIABILITY / INDEMNITY AGREEMENT IS FREELY AND VOLUNTARILY GIVEN. I UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS AND ASSUME SUBSTANTIAL RESPONSIBILITY BY SIGNING THIS. I AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE.

Signed: _____

Date: _____

Police Department Approval: _____ (Name and Title)

Officer Assigned: _____