



Kenneth D. Johnson
Chief of Police

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INTEGRITY - PROFESSIONALISM - PARTNERSHIP - INNOVATION - COMMUNICATION - EMPOWERMENT

Police Department Civilian Observer Application

- Citizen observers will be limited to persons 16 years of age or older.
- Citizen observers who are 16 or 17 years of age must provide parent/guardian endorsement.

Name: _____ **DOB:** _____
Address: _____
Telephone: _____ **Occupation:** _____
Reason for Request: _____

I agree to abide by the decisions and instructions of the Police Officer to whom I am assigned.

Signature: _____ **Date:** _____

Please indicate the three choices you would prefer in scheduling a ride-along with an officer. You will be notified of the approved date/time for you to ride. You will also be notified if your application was denied.

1st choice: **Date:** _____ **Time Frame:** _____
2nd choice: **Date:** _____ **Time Frame:** _____
3rd choice: **Date:** _____ **Time Frame:** _____

FOR OFFICE USE

Background checked by: _____ **Qualified:** Yes No
Assigned to: _____ **Assigned by:** _____
Assigned Date/Time: _____
Comments: _____

Release

The undersigned, _____, has requested The City of Fairview Police Department to allow me to participate in the Police Ride-Along Program as a citizen, passenger and observer in a Fairview police vehicle on city police business.

I understand that participating in these activities can involve the risk of injury and even death in extreme circumstances, as a result of an automobile accident, criminal conduct, or otherwise.

I have been informed that the police vehicles that I will be riding in have police equipment including, but not limited to, computers, firearms, safety equipment and other equipment, that may present hazards unique to police vehicles in the event of an accident. I understand that the operation of the passenger side airbag in these police vehicles may be impaired by the various police equipment mentioned above and may not protect me in the event of an accident.

I understand and accept that unanticipated and unexpected dangers may arise while participating as passenger observer in a police vehicle and, except for injuries resulting from the gross negligence of the City of Fairview, its representatives, agents or employees, I assume all risks of injury to my person that may be sustained in connection with this activity.

On behalf of myself, my heirs, administrators and assigns, and excepting only injuries resulting from the gross negligence of the City of Fairview or its representatives, agents or employees, I hereby release and discharge the City of Fairview, its representatives, agents and employees from all claims, demands, actions, causes of action of any sort for injuries sustained to my person during or as a result of my participation as a passenger/observer in the Police Ride-Along Program.

I certify that I am 16 years of age or older and have signed this release voluntarily with full awareness of the potential risks involved.

Signature: _____ Date: _____
In witness whereof, I hereunto set my hand and seal this _____ day of _____, 20____

Notary Public for the State of Oregon

My commission expires: _____

Complete if under 18 years of age:
PARENTAL/GUARDIAN ENDORSEMENT

I HAVE READ AND UNDERSTAND THE ABOVE release and indemnity agreement and agree to its provisions as they apply to my son/daughter, _____. I further agree to assume full responsibility for my son/daughter, as it would pertain to the provisions set forth above.

Parent/Guardian Signature

Parent/Guardian Address

Parent/Guardian Telephone

In witness whereof, I have hereunto set my hand and seal this _____ day of _____, 20____

Notary Public for the State of Oregon

My commission expires: _____