

INSTRUCTIONS FOR COMPLETION

City of Sedalia Police Department Guest Passenger and Observer Request and Release Form

1. Carefully read the information contained on the page entitled "City of Sedalia Police Department Guest Passenger and Observer Request and Authorization Terms." Police work is an inherently dangerous activity. Danger can, and often does, arise unexpectedly. The Requestor may witness alleged criminal activity as well as any possible danger. If this type of activity is observed, the requestor **WILL** be named in the officer's incident report as a witness. The Requestor *can* be called by the court to testify on what was witnessed. **Do not submit the request form unless you understand that you may find yourself in a dangerous situation and are willing to assume that risk or that you may find yourself in a court of law testifying under oath.**
2. Carefully read the information contained in Sections 1-6 of the "City of Sedalia Police Department Guest Passenger and Observer Request and Authorization Terms." If you agree to the terms and conditions listed, hand write your initials on the line in the lower right hand corner of the page above the words "Requestor's Initials" to indicate that you have read the warnings and conditions listed, understood them, and find them agreeable.
3. In Section 7:
 - i. Print your name in the blank space provided on the first line of the section.
 - ii. Enter the inclusive dates during which you would like to ride along with a Sedalia Police Officer.
 - iii. Explain what your reasons and purposes for riding are. *Please be advised that the Sedalia Police Department Guest Passenger and Observer program is for citizen education and awareness; it should not be construed to be entertainment. Therefore, the sufficiency of the explanation provided in this section will, in great part, determine whether the request is approved or denied.
4. In Section 8, you must verify suitability status for the program participation. **This section must be completed with signature(s) before a Notary Public.**
 - i. You must truthfully check lines "a," "b" and "c" in order for your request to be approved.
 - ii. If you are at least 21 years of age:
 - a. Check line "d."
 - b. Sign and date below where it provides for the "Requestor's Signature."
 - c. Proceed to Section 6.
 - iii. If you are at least seventeen, but less than 18, years of age:
 - a. Check line "e."
 - b. Sign and date below where it provides for the "Requestor's Signature."
 - c. Proceed to Section 9.
 - iv. Be certain to have the Notary Public complete the Notary Section before submitting the request.
5. In Section 9 you must enter the information requested so that a criminal background check can be made on you.
 - i. Print your full name (first, middle, last, [Sr., Jr., III, etc.]) in the space provided.
 - ii. Enter your date of birth in a six numerical digit format as MM/DD/YY in the space provided.
 - iii. Enter your social security number in the space provided.
 - iv. Enter the **complete address where you reside**, including apartment/unit number, in the space(s) provided.
 - v. Enter the telephone number where you can be reached during normal business hours in the space provided.
6. In Section 10, you must enter the information requested regarding whom to contact in case of emergency.

- i. Print your emergency contact's name in the space provided. If you are under 21 years of age, this must be your parent or guardian.
 - ii. Identify what the relationship of the emergency contact is to you (father, mother, husband, wife, friend, etc.).
 - iii. Enter the complete address where your emergency contact resides, including apartment number/unit number in the space(s) provided.
 - iv. Enter the telephone number(s) where your emergency contact can be reached (anytime during a 24 hour period) in the space provided.
7. If a member of the Sedalia Police Department is personally recommending approval of your request, have the person sign and date on the line next to "Recommended by."
8. **Attach a self-addressed and stamped envelope to the request forms** and submit the completed request form to the police officer at the Sedalia Police Department's front desk. The "complete request form" will consist of pages 3-5 and the self-addressed stamped envelope.
9. The request should be submitted **at least ten (10) days** in advance of the earliest requested ride date for processing.
10. This sheet will be returned in **your self-addressed stamped envelope**. Information will be shown on the other side of this form indicating whether or not your request was approved or denied and, if approved:
 - i. The authorization number
 - ii. The time period
 - iii. Number of authorizations during this approved time period

City of Sedalia Police Department Guest Passenger and Observer Program Request & Authorization Terms:

THIS PAGE CONTAINS THE LANGUAGE INCLUDED ON THE REQUEST AND RELEASE FORM YOU SIGN. IT WILL BE RETURNED TO YOU AFTER YOUR REQUEST HAS BEEN CONSIDERED AND A DETERMINATION IS MADE. PLEASE MAKE REFERENCE TO THE NUMBER SHOWN BELOW WHEN COMING IN TO RIDE OR MAKING AN INQUIRY ABOUT YOUR STATUS.

Whereas, the Sedalia Police Department, a legal component of the City of Sedalia, State of Missouri, owns and operates law enforcement vehicles with the City of Sedalia, as well as certain other equipment and facilities; and

Whereas, the Sedalia Police Department does from time to time allow individuals to observe police activities while in the company of police officers, in police vehicles, in restricted areas, and in other places in the City of Sedalia, for the purpose of informing and enlightening such individuals regarding the functions and operations of the Sedalia Police Department and/or for other purposes in keeping with community relations policies and/or programs; and

Whereas, Requestor desires to ride in Sedalia Police Department vehicles, owned by the city of Sedalia, and wishes to attend, witness, an/or observe to be in his/her best interest and is a value to him/her, and therefore, request the City of Sedalia Police Department to allow him/her to accompany (an) officer(s) and/or ride along and/or observe such activities; and

Whereas, the Requestor fully understands that law enforcement and police activities in general involve unusual danger to both person and property, and that the Sedalia Police Department and the City of Sedalia cannot ensure or guarantee his/her safety as an observer or participant, **the undersigned Requestor understands that if this request is granted that the Requestor assumes all risks arising out of the granting of this request.**

For and in consideration of the permission and privilege extended to the undersigned Requestor pursuant to his/her request to ride in vehicles owned by the City of Sedalia and to attend, witness and/or observe police activities in the company of Sedalia police officers, whether or not in police vehicles, in areas of the City, in restricted areas, the undersigned Requestor does hereby acknowledge that he/she is doing so freely and voluntarily, entirely on his/her own initiative; and

Now, therefore, the Requestor hereby declares:

1. I hereby accept all risks and responsibilities; and
2. I do hereby release and discharge the City of Sedalia, its officers, agents, employees, or other departmental members or departmental sponsored programs for any and all liability, claims, and right of action for my death or injury to me or my property, or for any other type of damage, which may occur in the future arising out of the granting of this request, whether or not they are due to any negligence of any officer, agent, employee, or departmental member or program sponsored by the Sedalia Police Department; and
3. This release extends not only to me, but also to my heirs, executors and personal representatives.
4. I understand that during the course of my ride along, I may encounter or be exposed to law enforcement sensitive information, including but not limited to personal identifiers heard or

- viewed while participating in this ride along. Personal identifiers include, but are not limited to, social security numbers, names, addresses, phone numbers, prior arrests, and driver license information. I understand that I cannot discuss this confidential information with anyone outside of the police department. I understand and agree that I will not share this information unless I am subject to a lawful subpoena or court order for which, such information is sought. If it is determined that I divulged any confidential information, my ride along can be revoked immediately and/or further action can be taken against me; and
5. I understand that this privilege of participating in the Guest Passenger and Observer Program, if initially granted, can be suspended or revoked at any time; and
 6. I understand that this release extends not only to me, but also to my heirs, executors and personal representatives.

Requestor's Initials

Requestor's Name:

☐ We are sorry, but your request to ride along with a Sedalia police officer has been denied.

☐ Your request to ride along with a Sedalia police officer has been approved, subject to the terms and conditions listed above, and in accordance with the authorizations shown below.

☐ Limits set by _____

Authorization Number: 20____-_____ Number of shifts: _____

per ☐ week ☐ month ☐ total

Period during which the authorization may be exercised:

Beginning ____/____/____ and Ending ____/____/____

Between ____:____ am/pm and ____:____ am/pm ☐ anytime

Guests may request to accompany a particular officer, but the On Duty **Shift Supervisor has sole discretion in making riding assignments.**

Guests must submit to the direction and control of the Sedalia police officer to whom the guest is assigned to accompany. No guest is permitted to involve him/herself in any interaction between an officer and a citizen, except at the direction of the officer to whom the guest is assigned.

7. Therefore, I, _____ do hereby request permission from the Chief of Police of the City of Sedalia to observe police activities in the company of (a) police officers (s) in police vehicles, in restricted areas, or in other places of the City of Sedalia, during the following dates and times:

Beginning ____/____/____ Time ____ hours

Ending ____/____/____ Time ____ hours

For the following reason(s) and purpose(s): _____

8. I further affirm that:

- ☐ a. I have never been convicted of a felony offense;
☐ b. I am not now on or pending a probationary status for any criminal offense; and
☐ c. I have no illicit purpose in seeking this request.

Also:

- ☐ d. I am at least 18 years of age, or
☐ e. I am at least 17 years of age and have a parent/guardian's permission, whose notarized signature is provided below.

_____ Requestor's Signature	____/____/____ Date Signed	_____ Parent/Guardian Signature (if required)	____/____/____ Date Signed
Notary Public Embosser or Black Rubber Stamp Seal		State _____ County (or City of St Louis) _____ Scribed and Sworn before me, this ____ day of _____, ____ Notary Public Signature _____ My Commission Expires _____ Notary Public Name (Printed) _____ _____	

9. Current Identification information for me is:

Print Name _____
 Date of Birth ____/____/____ Social Security # ____-____-____
 Address _____
 Telephone (____) ____-____

10. Current emergency contact information for me

Print Name _____
 Relationship _____
 Address _____
 Telephone (____) ____-____

Recommended By: _____

Date: ____/____/____

Authorized by the Chief of Police or his/her designee: _____ Date: ____/____/____