

## INSTRUCTIOS FOR COMPLETING THE:

### 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 Release Form.” Police work is an inherently dangerous activity. Danger can, and often does, arise unexpectedly. As well as any possible danger, the Requestor may also witness alleged criminal activity. 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, 2 and 3 on the page entitled “City of Sedalia Police Department Guest Passenger and Observer Request Release Form.” If you agree to the terms and conditions listed, **handwrite 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. Go to the reverse side of the form.
4. In Section 4:
  1. Print your name in the blank space provided on the first line of the section.
  2. Enter the inclusive dates during which you would like to ride along with a Sedalia police officer.
  3. Leave the time periods blank.
  4. 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.
5. In Section 5, you must verify suitability status for the program participation. **This section must be completed with signature(s) before a Notary Public.**
  1. You must truthfully check lines “a,” “b,” and “c,” in order for your request to be approved.
  2. If you are at least 21 years of age:
    1. Check line “d.”
    2. Sign and date below where it provides for the “Requestor’s Signature.”
    3. Then proceed to Section 6.
  3. If you are at least seventeen, but less than 21, years of age:
    1. Check line “e.”
    2. Sign and date below where it provides for the “Requestor’s Signature.”
    3. Have your parent or guardian sign and date where it provides for “Guardian’s Signature.”
    4. Then proceed to Section 6.
  4. Be certain to have the Notary Public complete the Notary Section before submitting the request.
6. In Section 6, you must enter the information requested so that a criminal background check can be made on you.
  1. Print your full name (first middle and last, as well as any suffix? [Sr., Jr., III, etc.]) in the space provided.
  2. Enter you date of birth in a six numerical digit format as MM/DD/YY in the space provided.
  3. Enter your social security number in the space provided.
  4. Enter the **complete address where you reside**, including apartment/unit number, in the space(s) provided.
  5. Enter the telephone number where you can be reached during normal business hours in the space provided.
7. In Section 7, you must enter the information requested regarding whom to contact in case of an emergency.
  1. 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.
  2. Identify what the relationship of the emergency contact is to you (he/she your: father, mother, husband, wife, friend, etc.).
  3. Enter the complete address where your emergency contact resides, including apartment/unit number in the space(s) provided.
  4. Enter the telephone number(s) where your emergency contact can be reached (anytime during a 24 hour period) in the space provided.
8. If a member of the Sedalia Police Department is personally recommending approval of your request, have that person sign and date on the line next to “Recommended by.”
9. **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 1-4 and the self-addressed stamped envelope.
10. The request should be submitted **at least ten (10) days** in advance of the earliest requested ride date for processing.
11. 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.
  1. the authorization number;
  2. the time period and the 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 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 within 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**, the person signing this Request and Release Form on the reverse side and initialing below is the person identified in this Request and Release Form and is hereinafter referred to as Requestor; and

**Whereas**, Requestor desires to ride in Sedalia Police Department vehicles, owned by the City of Sedalia, and wishes to attend, witness, and/or observe police activities while in the company of Sedalia police officers or other police department employees, which the Requestor considers 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 he undersigned 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 myself, but also to my heirs, executors, and personal representatives.

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.

Authorization Number: 20\_\_\_\_-\_\_\_\_\_  
Period during which the authorization may be exercised:

Limits set by \_\_\_\_\_  
Number of shifts: \_\_\_\_\_ per  week  month  total  
Beginning \_\_\_\_/\_\_\_\_/20\_\_\_\_ and Ending \_\_\_\_/\_\_\_\_/20\_\_\_\_  
Between \_\_\_\_:\_\_\_\_ am pm and \_\_\_\_:\_\_\_\_ am pm  anytime

guest 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.

## City of Sedalia Police Department

### Guest Passenger and Observer Request and Release Form

**Whereas**, the Sedalia Police Department, a legal component of the City of Sedalia, State of Missouri, owns and operates law enforcement vehicles within 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**, the person signing this Request and Release Form on the reverse side and initialing below is the person identified in this Request and Release Form and is hereinafter referred to as Requestor; and

**Whereas**, Requestor desires to ride in Sedalia Police Department vehicles, owned by the City of Sedalia, and wishes to attend, witness, and/or observe police activities while in the company of Sedalia police officers or other police department employees, which the Requestor considers 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 he undersigned 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. I understand that I may witness alleged criminal activity and I may be named in the officer's report, I also understand that I may get called into court to testify under oath what I witnessed; and
4. I understand that during the course of my ride along, I may be privilege to confidential information and I understand that I cannot discuss this confidential information with anyone outside of the police department. 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, if initially granted, can be suspended or revoked at any time; and
6. I understand that this release extends not only to myself, but also to my heirs, executors, and personal representatives.

\_\_\_\_\_  
Requestor's Initials

4. 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 officer(s) in police vehicles, in restricted areas, or in other places of the City of Sedalia, during the following dates and times:

Beginning \_\_\_\_/\_\_\_\_/20\_\_ Time \_\_\_\_\_ hours

Ending \_\_\_\_/\_\_\_\_/20\_\_ Time \_\_\_\_\_ hours

For the following reason(s) and purpose(s): \_\_\_\_\_

**Authorized Limits**

- Citizen  Student
- CPA Attendee
- Administration
- Candidate
- Spouse/family member
- Other

- one shift
- unlimited
- \_\_\_\_ shifts

Per:  
 month  total

5. 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 21 years of age, or
  - e. I am at least 17 years of age and have a parent/guardian's permission, whose notartized signature is provided below.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Requestor's Signature                      Date signed                      Parent/Guardian Signature (if required)                      Date signed

|  |  |                                     |
|--|--|-------------------------------------|
| Notary Public Embosser or<br>Black Rubber Stamp Seal | State _____<br>Scribed and worn before me, this<br>_____ day of _____,<br>Notary Public Signature _____<br>My Commission Expires<br>_____/_____/_____<br>Notary Public Name (Printed) _____<br>_____ | County (or City of St. Louis) _____ |
|--|--|-------------------------------------|

6. Current Identification information for me is:

Print Name \_\_\_\_\_  
 Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security # \_\_\_\_-\_\_\_\_-\_\_\_\_  
 Address \_\_\_\_\_  
 Telephone \_\_\_\_\_

7. Current emergency contact information for me is:

Print Name \_\_\_\_\_  
 Relationship \_\_\_\_\_  
 Address \_\_\_\_\_  
 Telephone \_\_\_\_\_

Recommended by: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

\_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_