

INSTRUCTIONS TO RIDE-ALONG PARTICIPANTS

Read this carefully. You will not be permitted to participate in this program unless this waiver form is correctly and fully completed and submitted at least Seven (7) days in advance of the date you wish to ride. Initial each item after reading.

- _____ 1. Participants shall wear professional casual clothing. Shorts, sleeveless shirts, and t-shirts are not acceptable attire.
- _____ 2. I understand that I must stay in the patrol car at all times unless the officer gives me permission to get out.
- _____ 3. I agree to wear my seat belt at all times when the vehicle is in motion.
- _____ 4. I will not consume alcohol or any other drug or medication within Twenty-four (24) hours before I ride that might impair my ability to function safely.
- _____ 5. I have no health conditions that could create an emergency situation that I have not told the police about. I have the following health conditions _____
_____ (indicate any conditions you are aware of such as diabetes, epilepsy, pregnancy, heart problems, etc.).
- _____ 6. I am not carrying any weapons, and I know I may not use any weapon while participating in the ride along program.
- _____ 7. I understand that I may not operate the police radio except in case of emergency.
- _____ 8. I will not attempt to assist the officer in any manner, which may create an unnecessary threat to my safety.
- _____ 9. I understand that I should avoid any contact with any person the officer may arrest while I am a ride along.
- _____ 10. I understand that I am not allowed to record any portion of the ride-along by any means (audio, video, film, or photo) unless I have the express written authorization from the Patrol Commander (Chief of Police for media representatives).
- _____ 11. If I am given permission to leave the patrol car to observe the officer working, I will do so only from a safe distance.
- _____ 12. I know that I have no police powers.
- _____ 13. I understand that, in the event of any civil or criminal litigation implicating me as a participant in this program, I am not entitled to legal representation from the City of Jacksonville and/or the Jacksonville Police Department.
- _____ 14. My safety and that of the officer are of primary concern, and I will do everything possible to minimize any risk to our safety.
- _____ 15. A Division Commander will recommend approval or disapproval of each request to participate in the ride along program.
- _____ 16. Officers may request, through their immediate supervisor, that the ride along privileges of the participant be terminated for just cause.

I have read these instructions and initialed each of them. I understand them and I agree to follow them.		
SIGNATURE	INITIALS	DATE