



### Cawker City Police Department Ride Along Program Application

The City of Cawker City, Kansas, offers a *Ride Along Program* for the purposes of providing interested applicants and citizens with an insight into the operations of the department.

Carefully read the following information and the guidelines on page 2, *before* completing the form.

**WAIVER, RELEASE, AND INDEMNIFICATION:**

I hereby request the privilege of accompanying members of the Cawker City Police Department while they are on general duty. I understand that I waive any and all actions, claims, demands against the City of Cawker City for all personal injuries, damages or losses of any nature which may result from any such activity and do further release the City of Cawker City, its staff, officers, agents, and employees from any claims, demands or actions arising there from, and agree to save them harmless there from. It is expressly agreed and understood that I will indemnify the City of Cawker City, its agents, assigns and subrogate in the event of any loss, damage or claims arising from the subject activity. This agreement is made in consideration of me being allowed to accompany Cawker City police personnel in performance of their duties.

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Please Print

Previous Names Used, if any: \_\_\_\_\_

Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
(If less than 3 years at current address)

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell Ph: (\_\_\_\_\_) \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Employer: \_\_\_\_\_ Work Ph: (\_\_\_\_\_) \_\_\_\_\_

Have you ever been arrested? Yes    No

If yes, where? \_\_\_\_\_ For what? \_\_\_\_\_

I affirm that I understand and agree the above waiver, release and indemnification and release the City of Cawker City from all liabilities. I also affirm that the above information is complete and accurate, understanding that any errors or omissions are grounds for denial of this application.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date



**Cawker City Police Department  
Ride Along Program  
Application**

**City of Cawker City**  
804 Locust  
Cawker City, KS 67430

**Phone:** 785-781-4713  
**Fax:** 785-781-4436  
**E-mail:** cawcty@nckcn.com

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**Information and Guidelines:**

- You will ride with a Cawker City Police Officer. The officer will attend to his/her normal duties and will respond to all calls for service to which he/she is assigned.
- Police officers can be and often are assigned duties which involve danger and serious risks. The officer will not avoid or disregard duties which involve emergencies or danger simply because you are accompanying him/her. While every effort will be made to ensure your safety, the police officer's first responsibility will be to carry out his/her assigned duties.
- The officer you accompany will be happy to discuss his/her duties and responsibilities insofar as time permits. If some emergency should arise, you must immediately comply with any orders or directions given you by the officer. This is for your own safety.
- Riders must be scheduled and the waiver form completed at least one week in advance.
- The minimum age for the *Ride Along Program* is 18 years.
- Riders are expected to be neat and clean in appearance. Sweatshirts, shorts, or other types of leisure apparel will not be permitted.
- Rides may be terminated at any time for persons who are unruly, fail to obey instructions, distract an officer from his/her duties or at the discretion of the supervising officer.
- A criminal history check will be completed on each applicant, the results of which may be used to determine whether or not the Ride Along is approved.