



# Southington Police Department

Town of Southington

## Ride-Along Program

In order to facilitate the Ride-Along Program, the following guidelines are established:

### **YOU ARE REQUIRED TO:**

Be dressed appropriately, in such a manner that will in no way reflect upon or have a negative bearing upon you, the program, or the Police Department. The following are examples of types of clothing that is *not acceptable*:

- Casual Jeans or Shorts
- Sandals or Open Toe Shoes
- Police Uniforms or insignia from another Department
- Sweatshirts, sweatpants or t-shirts

No person will be allowed to participate in a Ride-Along if they:

- Are carrying a weapon, including firearm(s), even if they have a permit
- Are impaired by drugs, alcohol or both
- Are determined to be unfit to participate in the program by the Shift Commander or Administrative Supervisor
- Are not presently in good health
- Have consumed alcohol within the previous (8) hours
- Are an immediate family member of the Officer that they are riding with
  - Parent, Step-Parent, Sibling, Step-Sibling, Child, Step-Child, Spouse

You are required to arrange for transportation to and from the police station.

In order to comply with Departmental policy, you must use the seat belts and shoulder restraints in the police vehicle. It is important for you to know that certain police calls are inherently dangerous. If it is necessary for the Police Officer to respond to a call that could potentially put you at risk, you will be dropped off at a mutually acceptable location and picked up after the event.

**DO NOT** interfere in any way with the officer's handling of a situation. You may ask questions about a specific incident after it has been completed and you have left the scene.

A waiver of liability form is attached and is required to be executed by you prior to the Ride-Along. In essence, it releases the Southington Police Department and/or the Town of Southington from liability for any injury or other disability that you might sustain during the Ride-Along.

*You may observe an event during your Ride-Along that may require you to appear in court as a witness. Ride-Along participants may not record or photograph any portion of the Ride-Along*

**Southington Police Department**  
69 Lazy Lane  
Southington, CT 06489  
P: 860-378-1600  
F: 860-378-1699



## Police Ride-Along Program Request and Waiver Form

You must sign and submit this form to the Southington Police Department before your ride-along can be scheduled.

d e s i i s i i s i i

**You must also complete the State of CT Level 1 Security Training, in person, prior to scheduling a Ride-Along**

I, the undersigned, hereby request permission to ride in a police vehicle of the Southington Police Department, at such times and in such areas as may be approved by the Chief of Police or his designated representative. I understand that the police vehicle will be engaged in normal police patrol and law enforcement activities, some of which may be dangerous and expose passengers to risk or harm. I acknowledge this risk and voluntarily accept it, hereby releasing the Town of Southington, the Southington Police Department, and the individual Officers, employees, and/or agents of such Town and Police Department from any liability which might result from my participation in this program. I give permission to have my background checked for criminal history. I agree to the rules and instructions listed on this form.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### Completed by Applicant

Full Name of Applicant: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Driver's License ID Number: \_\_\_\_\_ State: \_\_\_\_\_ Sex: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

1st Date Preferred (4 hour period): \_\_\_\_\_ 1st Time Preferred (4 hour period): \_\_\_\_\_

2nd Date Preferred (4 hour period): \_\_\_\_\_ 2nd Time Preferred (4 hour period): \_\_\_\_\_

Requested Officer: \_\_\_\_\_ School Attending/Occupation: \_\_\_\_\_

**NOTE: Applicants under eighteen (18) years of age must have this form read and signed by their parent or guardian prior to any participation in this program. The ride-along program is generally open to persons who are at least eighteen (18) years of age and a Southington resident. The minimum age allowed will be sixteen (16) years of age, with approval.**

### Permission of Parent or Guardian

I, the undersigned, being the parent or guardian of \_\_\_\_\_ hereby join with him/her in requesting permission for him/her to ride in a police vehicle as foresaid, and do join with him/her in granting a release and discharge the Town of Southington, the Southington Police Department, and the individual Officers, employees, and/or agents of such Town and Police Department from any liability which might result from my participation in this program.

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

### Administrative

Approved: YES NO COLLECT Level 1 Security Training Completed: YES NO

Ride-Along Completed by: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Background Completed by: \_\_\_\_\_ Date Completed: \_\_\_\_\_

*This Form must be submitted to the Sergeant assigned to the Administrative Section,  
at least 7 days prior to the requested Ride-Along date.*