



# Castle Rock Police Department

141 A St SW / P.O. Box 475

Castle Rock, WA 98611

Office: (360) 274-4711 Fax: (360) 274-4318

## RIDE ALONG AGREEMENT ASSUMING RISK OF INJURY OR DAMAGE WAIVER AND RELEASE OF ALL CLAIMS

For and in consideration of being permitted to ride in a City of Castle Rock Police Department vehicle as a passenger or observe, and in acknowledgment of the fact that the work and activities of said law enforcement department are inherently dangerous involving possible risk of injury, death, damage, expense or loss to person or property, and further in acknowledgement that said law enforcement department did not take the initiative in extending an invitation to ride or accompany its members

I, \_\_\_\_\_  
Rider name (PRINT) Date of Birth

For myself, my heirs, assigns or other successors in interest, do hereby release and forever discharge the City of Castle Rock, its police officers, agents, employees, agencies and all other departments from any and all liability for all existing and further claims, damages, and causes of action of any nature whatsoever known or unknown including by not limited to negligence which I may have or which may inure to me as a result of the acts or omissions of the City of Castle Rock Police Department or officers who I am accompanying or observing or any other officer on that police force, or the acts or omissions of any third person, or which otherwise arise as a result of my being said passenger or observer, to include back ground checks and I do hereby waive any claim against the City of Castle Rock, its police department, officer(s), agents, employees, agencies and all other departments for personal injuries, death, loss of service, property damage or medical expenses of whatever nature, which might arise during or as a result of my accompanying the City of Castle Rock Police Officer as a passenger in their vehicle or as an observer of the performance of their official duties.

Signature: \_\_\_\_\_

Parent or Guardian: \_\_\_\_\_ (If rider is under 18 years of age)

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_