

## COPPELL POLICE DEPARTMENT PATROL RIDE-ALONG REQUEST/WAIVER

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I, \_\_\_\_\_, would like to participate in the ride-along program on \_\_\_\_\_,

Accompanying Officer \_\_\_\_\_ for the following reason(s):  
(Leave blank unless a specific officer is requested)

\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
Name Telephone

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### WAIVER OF LIABILITY

I, \_\_\_\_\_, in exchange for the City of Coppell allowing me to participate in Ride Along program, a program sponsored by the City of Coppell, Texas and the Coppell Police Department, and recognizing that such program may involve certain dangers, including but not limited to: motor vehicle accidents, proximity to criminal activity and possible interaction with criminal offenders, and the possibility of physical danger, harm accidents, and injuries, do hereby agree to and assume any and all risks arising from any incident, action, occurrence or activity occurring on public, private or other property, which affects me in any manner whatsoever, and do hereby release and agree to on my behalf and on behalf of my heirs, executors and assigns hold harmless and to indemnify the City of Coppell, TX, its officials, departments, officers, agents, and employees, in both their official and individual capacities, from any and all liability, claims (including claims for attorneys' fees and costs of court), suits, demands, causes of action or alleged causes of action which may arise, or may be alleged to have arisen, from my participation in the Ride Along program, including liability, claims, suits, demands or causes or action which arise, or which allegedly arose, from the sole negligence or acts of omissions of the City of Coppell, TX, its officers, agents, employees, or officials. I authorize the City of Coppell to use any video, photo or other likeness of me participating in this activity.

I understand and acknowledge that my participation in said program is solely that of a volunteer, and not that of an agent, employee, or representative of the City of Coppell or the Coppell Police Department.

It is further agreed that the execution of this release shall not constitute a waiver by the City of Coppell, its officers, agents, officials and employees, of the defense of governmental immunity, where applicable, or to defenses predicated on the Texas Automobile Guest Statute, chapter 72 of the Texas Civil Practice and Remedies Code, or any other defense, claim, cause of action or assertion of any kind or nature, recognized by any court of law, administrative agency, or other entity.

I certify that I have read the foregoing instrument, that I understand its terms and conditions, that I make this waiver voluntarily and that I have not relied upon any representations made by the City of Coppell, or its officers, agents, officials, or employees in signing this release. I further certify that I am an adult, am in sound mental health, and fully capable of making this waiver of liability.

I agree to obey all rules, directives and commands from any member of the Police Department.

IN WITNESS WHEREOF and, intending to be legally bound, the undersigned affixes his

hand at Coppell, Texas, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Date of Ride: \_\_\_\_\_

\_\_\_\_\_  
Signature

If under 18 years of age:

\_\_\_\_\_  
Parent/Guardian

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public, State of Texas

**FOR DEPARTMENT USE:** Request is Approved  Disapproved  by \_\_\_\_\_

CHC/Records check  by \_\_\_\_\_