



**10405 St. Charles Rock Road
St. Ann, Missouri 63074**

RIDE-ALONG OBSERVER PROGRAM AGREEMENT

Instructions

1. The Ride-Along Observer Program is being offered to you as a privilege by the St. Ann Police Department (SAPD). As an observer, you must sign the Waiver & Release form. You are expected to adhere to the following rules:

- 1.1. Observers under 18 years of age must have the form signed by a parent or guardian in-person at the St. Ann Police Department at the time of form submission. You must have your ID with you. No one under the age of 16 may participate in the program unless an exception has been granted by the Chief of Police or his designee.
- 1.2. The Ride-Along Observer Program is for observation opportunities only and not intended for interviews. Members of the media wishing to conduct interviews with an officer or conduct a special project involving recording of an officer and/or the interior of police vehicles should make their request through the Chief of Police.
- 1.3. No video or audio recordings will be allowed unless authorized by the Chief of Police or his designee. Observers may have a cell phone with them during the ride, however, will be required to have the phone shut OFF and out of sight for the duration of the ride.
- 1.4. You will be notified within approximately two weeks if your request was approved. If approved, you will be notified of your ride date and time. Please arrive at the department at least 15 minutes prior to your ride time. You must have a state issued photo ID when arriving. This will provide adequate time to complete any necessary forms and/or receive any required briefings. Everyone entering the St. Ann Police Department is subject to search.
- 1.5. You will be returned to the Department at the end of the ride-along. In the event that the ride is terminated, or you do not wish to complete the ride, you will be returned to the station earlier than scheduled, if practical.
- 1.6. Observers are required to be suitably dressed in collared shirt, t-shirt, jeans or slacks, and closed toe shoes. Sandals, tank tops, shorts, and ripped or torn clothing is not permitted.
- 1.7. Observers are **prohibited** from possessing weapons of any kind during the ride-along. Qualifying officers/retired officers wishing to carry a firearm during the ride-along must obtain pre-approval to do so and indicate their intentions by checking the appropriate box on the application.
- 1.8. It is important that you do not interfere in the officer's activities. Please hold any questions you may have until after the officer has completed the call or is no longer in contact with a suspect, prisoner, or witness. Note: The officer may not be able to answer questions at the time you ask or, due to privacy concerns, may not be able to fully answer your question.
- 1.9. You may not engage in any police activity unless specifically directed by an officer.
- 1.10. You may not leave the police car or talk with victims, prisoners, suspects, witnesses, or other persons without obtaining permission from the officer.
- 1.11. Observers may become a witness to situations and actions the officer is involved in and may be listed in police reports as such and may be required to testify in court.
- 1.12. Observers may ride up to two (2) times in a calendar year unless an exception has been granted by the Chief of police and/or his designee.
- 1.13. Failure to adhere to the above rules will result in immediate termination of the ride and the observer forfeits the opportunity to participate in the future.

2. Eligibility

- 2.1. The St. Ann Police Department Ride-Along Observer Program is offered to civilians, visiting law enforcement officers, and potential police officer applicants. It provides a unique opportunity to OBSERVE the daily operations, activities, and functions of a St. Ann Police Officer. Reasonable efforts will be made to accommodate interested persons. Participation in the Ride-Along Observer Program is a privilege. Any applicant may be disqualified without cause from participating in the program. Factors that may be considered in disqualifying an applicant include, but are not limited to:
 - 2.1.1. Being under 16 years of age;
 - 2.1.2. Prior criminal history;
 - 2.1.3. Pending criminal action;
 - 2.1.4. Pending lawsuit against the St. Ann Police Department; and/or
 - 2.1.5. Denial by any supervisor.



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3. Availability of Ride Along Times

- 3.1. The available times to ride are between 8 a.m. and Midnight. Rides are limited to 4 hours. Please select the time you prefer. Every effort will be made to schedule you during your preferred time. You will be notified by phone of the date and time you are scheduled to ride.

- 3.1.1. 8:00 a.m. to 12:00 p.m.
3.1.2. 12:00 p.m. to 4:00 p.m.
3.1.3. 4:00 p.m. to 8:00 p.m.
3.1.4. 8:00 p.m. to 12:00 a.m.

<input type="checkbox"/>
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- 3.2. Please provide three (3) dates and times for your ride-along: _____
3.3. The officer you ride with will be determined by the Shift Supervisor on the day of your ride along.

4. Cancellation

- 4.1. A ride-along observer may have his/her ride canceled at any time if deemed necessary by the Watch Commander due to unusual circumstances.
4.2. The ride-along observer may cancel their request to ride-along at any time and may request to end the ride-along earlier than the scheduled end time.

5. Witness in Criminal Court Proceedings:

- 5.1. As indicated above in section 1.11 observers may become witness to situations and actions the officer is involved in and may be listed in police reports as such and may be required to testify in court. If you are not willing or feel you would be unable to attend court and testify should this occur, you should reconsider applying for the ride along program.
5.2. During your voluntary participation in the City of St. Ann's Ride-Along Observer Program, you may be exposed to confidential criminal justice information. Pursuant to state and federal regulations, this information is to be used only for the administration of criminal justice. Participants in the Ride-Along Observer Program are prohibited from sharing any criminal justice information observed or heard within the agency with any other person. Improper disclosure of criminal justice information may result in dismissal from the program and/or criminal prosecution (RSMo 610.115).

Waiver and Release

Name: _____/_____/_____
(Last) (First) (Middle)

Address: _____ City: _____ State: _____ Zip: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____ Date of Birth: _____ Social Security Number: _____

State of Driver's License: _____ Driver's License Number: _____ Occupation: _____

Representing Club/Organization: _____ Employer's/Organization's address: _____

Emergency Contact

Name: _____ Relationship: _____ Primary

Phone: _____ Secondary Phone: _____

NOTE: If you are under the age of 18, you must have a parent or guardian's authorization. This authorization must be signed *in-person and witnessed by the SAPD employee accepting the application* at the St. Ann Police Department located at 10405 St. Charles Rock Road, St. Ann, MO 63074



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I, _____ certify that all the above information is true and accurate. I understand that pursuant to qualifying for the Ride-Along Observer Program, a criminal history check, including SAPD records, Missouri Uniform Law Enforcement System (MULES), Regional Justice Information Systems (REJIS) and National Crime Information Center (NCIC) will be conducted on me. Should I be permitted to participate in this program, I agree to abide by all rules provided in these Instructions and by SAPD employees. I will behave in a reasonable and appropriate manner given the circumstances I am faced with during the time I am a part of the ride-along observer program, and I agree to appear for all court dates and testify as may be required.

I voluntarily agree to participate in the City of St. Ann's Ride-Along Observer Program (the "Program") sponsored by the St. Ann Police Department (SAPD). I am aware of the risks and hazards inherent in my participation in the Program and in accompanying one or more SAPD police officers when on duty, and do hereby voluntarily assume all risk of loss, damage, or injury to me or my property, including death, which may be sustained while, or incidental to, accompanying one or more SAPD police officers while on duty.

I agree to comply with all of the rules and terms of this Agreement. I further agree to follow the verbal instructions of the police officer(s) who are assigned to me. If I fail to comply, I may be asked to leave the Program that day or permanently. My participation is voluntary. I understand that any injury I may sustain as a result of my participation in the Program is NOT covered by worker's compensation.

As a condition of being permitted to accompany one or more SAPD police officers in the course of their duties, I release the City of St. Ann, its departments, elected officials, agents, and employees from all claims and liability in any causes of action, including, but not limited to negligence, claims for personal injury or death, or claims for property loss or damage, which I may occur because of my participation in the Program or related to event while I am accompanying any SAPD police officer(s) on duty. In addition, and for the same grant of permission, I promise to release and promise not to sue the City, its departments, elected officials, agents, and employees, and agree to forever hold the City and each of the individuals harmless from any liability, claims, demands, actions, or causes of action.

The terms of this Waiver and Release shall be in full force and effect from the date stated below and shall remain in effect for any other occasion when I may participate in the Ride-Along Program.

I agree this Waiver and Release is binding upon me and my heirs, executors, administrators, personal representatives, and assigns, and shall ensure to the benefit of the said City, officers and agents, public officials, and persons designated in this Waiver and Release, and their heirs, executors, administrators, personal representatives, assigns, and successors in office.

Dated this _____ day of _____, 20_____.

Participant's Print Name: _____

Participant's Signature: _____

FOR MINOR PARTICIPANTS: I, the undersigned, represent that I am legally appointed or natural guardian of the above- named person who is under the age of 18; that he/she has signed this document with my full knowledge and consent; and that I join in signing this document and agree to the terms and provisions for myself and my heirs, executors, personal representatives, and assigns.

Print Name: _____ Signature: _____

FOR OFFICIAL USE

Witnessed By: _____ DSN: _____ Date: _____

Computer Background Check Completed: ☐ Results: _____ Date: _____

Approved by the Chief or Designee: Yes ☐ No ☐ Chief of Police or Designee: _____ Date: _____