

# CEDAR PARK POLICE DEPARTMENT

## RIDE ALONG REQUEST

911 Quest Parkway Cedar Park, Texas 78613 512-260-4600

The purpose of the ride along program is to allow members of the community to see what a police officer encounters while on their regular tour of duty. Currently the program allows for one ride along unless you are a graduate of the Cedar Park Citizen's Police Academy program. By completing this request form, you are consenting to a basic background check including for warrants and must be both 18 years of age or older and pass that background to be considered. If your application is approved, you must follow the lawful directions of the officer when on patrol. Failure to do so will result in the discontinuation of the ride along. The officer and any appropriate supervisor may discontinue the ride along at any time that they deem it in the best interest of the Department. Once this request has been processed, a representative from the Department will contact you to schedule your ride along. **Dress attire is business casual. No t-shirts, shorts or open toed shoes are permitted.** If you have any questions regarding the status of your request, please contact the Community Services Division at 260-4600.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_

D.O.B. \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_ Driver's License # \_\_\_\_\_ D.L. State: \_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_ Personal Occupation: \_\_\_\_\_  
Emergency Contact Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Please check if either of the following apply to you:

I am 18+ years old and am requesting this ride along for school credit.

I am 18+ years old and am interested in applying to be a Cedar Park Police Officer.

Have you ridden with this Department before?  Yes  No

If yes, when and with whom?: \_\_\_\_\_ Reason for requesting a ride along with CPPD: \_\_\_\_\_

Date requesting to ride: \_\_\_\_\_ Shift: 6AM – 6PM 6PM – 6AM Other: \_\_\_\_\_  
Specific Officer Requested: \_\_\_\_\_  
Relationship: \_\_\_\_\_

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### Internal Use Only

Date Request Received: \_\_\_\_\_ Department Member: (Print) \_\_\_\_\_  
Applicant passed background and warrant check?  Yes  No If no, why?: \_\_\_\_\_

Supervisor Approval:  Yes  No Signature: \_\_\_\_\_ Date: \_\_\_\_\_

ride along Scheduled: Date: \_\_\_\_\_ Shift:  6AM – 6PM  6PM – 6AM Other: \_\_\_\_\_

Officer Assigned: (Subject to Change by Supervisor) \_\_\_\_\_

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**LIMITED LIABILITY RELEASE**

In consideration of being allowed to accompany Cedar Park Police Officers on official patrol and otherwise participate in the Civilian Ride Along Program:

I, \_\_\_\_\_ the undersigned, binding my heirs, executors, administrators, and assigns, do hereby release and agree not to hold liable, the City of Cedar Park, its officers, agents, and employees and especially Officer from any and all actions, causes of action, claims, demands, costs or damages arising from or resulting from property damage, personal injuries or death sustained by me while participating in the rider program, whether or not such damage or injury was caused or contributed to by any acts or omissions, including negligent acts or omissions, of any other person or persons. I further agree, binding my heirs, executors, City of Cedar Park, its agents, officers, and employees, and especially the above named officer, from any liability, action, claim, damage, award or judgment incurred or suffered by the above city or individuals as a result of any act or omission by me or caused in whole or in part by me while participating in the rider program whether or not also caused in part by a person indemnified hereunder. In addition, I make the following representations and acknowledgments upon which I intend the City of Cedar Park to reply:

I understand and agree that while accompanying any police officer during his law enforcement tour, I am to be only an unarmed, lay observer and bystander, with no active role whatever and that I will have and am given no duties, rights, powers of authority whatever other than those conferred by law upon any other person in like or similar circumstances as may arise from time to time.

I realize and agree that while participating in the rider program, I will not be an agent, servant, or employee of the City of Cedar Park and therefore will not be covered by the City of Cedar Park for any workers compensation, death or disability benefits.

I realize and acknowledge that there is an element of danger inherent in riding with a police officer on duty. It is foreseeable that situations may arise at any time, suddenly and without warning, in which I may be placed in great physical danger. I knowingly and willingly agree to assume these risks. I agree that neither the City of Cedar Park, nor any of its officers or employees shall be obligated to take any extraordinary steps to protect my person or to provide a means of withdrawal or retreat for me, and I release them from any duty to do so.

I agree that any information that I may gain, through participation in the program, will be used by me only for my personal education purposes except where I am summoned as a witness in any administrative or court proceeding.

I understand that my participation in the above named program is a privilege subject to revocation at any time by the City of Cedar Park, whose decision in the matter will be binding.

DATE: \_\_\_\_\_

\_\_\_\_\_  
Printed/Typed Name

\_\_\_\_\_  
Signature