



# Clear Creek County Sheriff's Office

405 Argentine Street ★ Post Office Box 2000  
Georgetown, Colorado 80444  
[www.clearcreeksheriff.us](http://www.clearcreeksheriff.us)

## Citizen Ride Along Waiver

The Clear Creek County Sheriff's Office is pleased that you have chosen to participate in our program to provide interested citizens with an insight into the line operations of the Sheriff's Office. It is our hope that you will find this experience both informative and enjoyable.

We would like you to be fully aware of the conditions and circumstances under which this program operates:

1. You will be assigned to ride with a regular Patrol Deputy of the Sheriff's Office. He/She will be assigned to his/her normal duties and will respond to all calls for service to which he/she is assigned.
2. Patrol Deputies can and often are assigned duties which involve danger and serious risks. The Deputy you are riding with is no different. He/She will not avoid or disregard duties which involve emergencies or danger simply because you are accompanying them.
3. While every effort will be made to ensure your safety, the Deputy's first responsibility will be to carry out his/her assigned duty.
4. The Deputy you will accompany will be happy to discuss his/her duties and responsibilities insofar as time permits. If, however, some emergency should arise, you must immediately and without question comply with any orders or directions given to you by the Deputy. This is for your own safety.

*In consideration of permission which I have received to accompany one or more Deputies of the Clear Creek County Sheriff's Office of Georgetown, Colorado in the course of his or her duty, I, the undersigned, do by these presents release the County of Clear Creek, its Deputy Sheriff's, Public Officials, Agents, Servants and Employees from any and all liability claims, demands, actions and causes of actions which I may hereafter have on account of any and all injuries and damage to me or to my property or my death, arising out of or relating to any happening or occurrence while I am accompanying any Deputy or Deputies of the Clear Creek County Sheriff's Office on duty, or incidental thereto, and for the same consideration, I promise to release, and covenant not to sue the said County and the said persons, and agree to forever hold them and each of them harmless from any such liability, claims, demands, actions or causes of action. The terms hereof shall be of full force and effect on the date hereof and on any other occasion when I may hereafter accompany any Clear Creek County Sheriff's Office Deputy or Deputies.*

*I have read and understand the conditions of this program as stated above and hereby voluntarily and knowingly assume all risk of loss, damage or injury to me or my property, including my death which may be sustained while or incidental to accompanying one or more Clear Creek County Sheriff's Office Deputies while on duty.*

*This release and agreement shall be binding upon me and my heirs, executors, administrators, personal representatives and assigns, and shall insure to the benefit of the said County Agents, Public Officials and persons herein designated, and their heirs, executors, administrators, personal representatives, assigns and successors in office.*

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date of Birth                  Social Security Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
Employer                          Occupation

\_\_\_\_\_  
Home #                  Cell #                  Work #

\_\_\_\_\_  
School                          Grade

\_\_\_\_\_  
**Requested Date and Time Span of Ride**  
(See reverse side for Parental Consent)

## Parents or Guardians Consent

*I/We, the undersigned, represent that I/we are the legally appointed or natural guardian(s) of the above person who is under the age of 18 years; that he/she has signed the within and foregoing document with our full knowledge and consent and that I/we join in the execution of the same terms and provisions for myself/ourselves and my/our heirs, executors, personal representatives and assigns.*

### Parent/Guardian #1

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date of Birth Social Security Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
Employer Occupation

\_\_\_\_\_  
Home # Cell # Work #

### Parent/Guardian #2

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date of Birth Social Security Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
Employer Occupation

\_\_\_\_\_  
Home # Cell # Work #

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Witness Printed Name

**(Sheriff's Office Use Only)**

Supervisor

Dispatch

**Date of Last Ride Along:** \_\_\_\_\_

**CCIC/NCIC Clearance:** \_\_\_\_\_

**Criminal History:** \_\_\_\_\_

**Driver's History:** \_\_\_\_\_

**Approved or Denied:** \_\_\_\_\_

**Scheduled Date  
and Time Span of Ride:** \_\_\_\_\_

**Assigned to:** \_\_\_\_\_

**Citizen Advised:** \_\_\_\_\_

**Supervisor/Date:** \_\_\_\_\_