



Yamhill County Sheriff's Office

Sheriff Sam Elliott

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"Excellence In Service"

Citizen Ride-Along Request Form

Applicant Information

Name _____ Date of Birth _____
(LAST) (FIRST) (M.I.)

Address _____ City _____ Phone # _____

Email Address _____

DL State _____ DL Number _____ Current Employer _____

Have you applied for an employment position with the YCSO?: Yes No

I request permission* to ride along as a citizen observer with an YCSO deputy because:

**All requests are subject to approval.*

Please list three choices for days of the week and times of the day for your ride-along:

1st Choice: Mon Tue Wed Thu Fri Sat Sun Morning/Day Evening/Night
2nd Choice: Mon Tue Wed Thu Fri Sat Sun Morning/Day Evening/Night
3rd Choice: Mon Tue Wed Thu Fri Sat Sun Morning/Day Evening/Night

Emergency Contact Information

Name _____ Phone # _____ Alt Phone # _____
(LAST) (FIRST) (M.I.)

Address _____ City _____

**I authorize the Sheriff's Office to conduct a complete records check of me prior to riding and understand that any information of an adverse or criminal nature may disqualify me.*

Applicant Signature _____ Date _____

(FOR OFFICIAL USE ONLY)

Date Received: _____ ID Verified by: _____

Background Check: LEADS/NCIC _____ DMV _____ VISION _____

Approved / Denied by: _____ Date: _____ Reason for denial (if applicable): _____

Ride Along Scheduled for: _____ Deputy _____ Date _____ Shift Times (ex: 0700-1100) _____

Citizen Ride-Along Waiver

By signing the bottom of this form, the above named individual, here in after referred to as "Releasor", his/her parents, his/her spouse, legal representative, heirs and assigns, hereby releases, waives and discharges Yamhill County, the Yamhill County Sheriff's Office, its officers, employees and assigns, and each of them here in after referred to as "Releasee" from all liability for any and all loss or damage and any claim or damages resulting there from, on account of injury to Releasor's person or property, even injury resulting in death of the Releasor, whether caused by negligence of Releasee or otherwise while the Releasor is participating in the ride-along.

Releasor agrees to indemnify the Releasee and each of them from any loss, liability, damage or costs that might be incurred due to the presence of Releasor on the date and while participating in the ride-along, whether caused by the negligence of Releasee or the ride-along.

Releasor hereby assumes full responsibility for the risks of bodily injury, death, or property damage due to the negligence of Releasee or otherwise while participating in the ride-along.

Releasor expressly agrees that this release, waiver and indemnity agreement is intended to be as broad and as inclusive as permitted by the laws of the State of Oregon and that if any portion thereof is held invalid it is agreed that the balance shall, notwithstanding, continue in full force and effect.

If Releasor participates in multiple ride-alongs, this release form continues this hold harmless agreement.

Releasor Signature

Parent/Guardian (if is under 18 years of age)

Date

Date