

# RIDE-ALONG RELEASE FORM

STATE OF NORTH CAROLINA - COUNTY OF JOHNSTON - TOWN OF SELMA

## Agreement between

THE TOWN OF SELMA, NORTH CAROLINA  
THE SELMA POLICE DEPARTMENT

AND **Name:** \_\_\_\_\_

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

\_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Driver's license #:** \_\_\_\_\_

This agreement, between the Selma Police Department, a department of the Town of Selma, North Carolina, an agency of the State of North Carolina, and

\_\_\_\_\_ is made and entered into this the \_\_\_\_\_ day of \_\_\_\_\_.

**Reason for Ride-along:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### WITNESSETH:

WHEREAS, the Selma Police Department has agreed to cooperate with the above named rider in order that he/she may ride with a member of the Selma Police Department for the reason set forth above; NOW, THEREFORE, \_\_\_\_\_ waives any claim for injury to himself/herself, for himself/herself and his/her heirs and assigns, and hereby agrees to indemnify, protect and save harmless the Selma Police Department, individual members thereof, and the Town of Selma, North Carolina, from any loss or damage arising out of his/her riding with a member of the Selma Police Department for the reasons herein above set out.

This institution is an equal opportunity provider and employer.

\_\_\_\_\_  
Signature of WITNESS

\_\_\_\_\_  
Signature of RIDER

\_\_\_\_\_  
Signature of WITNESS

\_\_\_\_\_  
Signature of PARENT/GUARDIAN if Rider is under 18