

Application Checklist

Have you included?

- () Completed Application form
- () Birth Certificate
- () Recent photograph (besides photo on drivers license)
- () Signed Ride Along Waiver
- () Driver's License
- () Current copy of Vehicle Registration
- () Current copy of proof of Auto Insurance
- () Signed Waiver for Release of Information
- () Signed Background Investigation Discovery Waiver
- () A one page sheet telling us about yourself and including any information you feel would be beneficial to us in our assessment.

MURRIETA POLICE DEPARTMENT
24701 Jefferson Avenue
Murrieta, CA 92562

Volunteer Application

Date _____

Name _____
(Last) (First) (Middle)

Address _____

City _____ Zip Code _____

Telephone Number _____ Email Address _____

Driver's License Number _____ Social Security Number _____

Date of Birth _____

Sex _____ Height _____ Weight _____

Blood Type _____ Hair Color _____ Eye Color _____

Race _____ Complexion _____

Any Physical Marks _____

Spouse's name (and address if different from above) _____

Address _____

City and Zip Code _____ Phone _____

Former Spouse (if married previously) _____

Address _____

City and Zip Code _____ Phone _____

Emergency Contact

Name _____

Address _____

City and Zip Code _____

Telephone Number _____ Relationship _____

Personal History Information

How long have you lived in the City of Murrieta? _____

How long have you lived in the County of Riverside _____

If you moved to Murrieta less than ten years ago, please give you prior address:

Street Address _____

City _____ State _____ Zip Code _____

Name of Police Agency that serviced that area: _____

Address _____

City _____ State _____ Zip Code _____

Telephone Number (include area code) _____

Do you wear corrective lenses? _____ If yes, what is your vision uncorrected? _____

Family Physician:

Name _____

Address _____

Telephone Number _____ Date of your last physical exam _____

Hospital Preference _____ City _____

Medical Insurance Group _____ I.D.# _____

Have you experienced an allergic reaction to any substance? Yes ___ No ___

If yes, what substance if known? _____

Please explain circumstance

Please list any handicaps you have which may limit your participation in Department activities or functions. _____

I hereby certify that all statements in this personal history statement are true and complete to the best of my knowledge and I understand that any misstatements of material facts will subject me to disqualification.

Signature _____ Date _____

Employment History

If currently employed

Place of employment _____

Business mailing address _____

Telephone # _____ Your position _____

Hire date _____ Supervisor's name _____

List days and hours you work _____

Brief job description _____

If retired

Last place of employment _____

Business mailing address _____

Telephone # _____ Your position _____

Employment dates _____ Full or part time _____

Supervisor's name _____

Brief job description _____

List your previous employers for the past ten years

Place of employment _____

Business mailing address _____

Telephone # _____ Your position _____

Employment dates _____ Full or part time _____

Supervisor's name _____

Brief job description _____

Employment History (continued)

Place of employment _____

Business mailing address _____

Telephone # _____ Your position _____

Employment dates _____ Full or part time _____

Supervisor's name _____

Brief job description _____

Place of employment _____

Business mailing address _____

Telephone # _____ Your position _____

Employment dates _____ Full or part time _____

Supervisor's name _____

Brief job description _____

Place of employment _____

Business mailing address _____

Telephone # _____ Your position _____

Employment dates _____ Full or part time _____

Supervisor's name _____

Brief job description _____

(Continue on a separate sheet of paper if required)

Personal References

Please list four personal references (other than relatives) who have known you well. Our background investigator will contact these references.

Reference 1

Name _____

Address _____

City _____ State _____ Zip code _____

Telephone Number _____ Years known _____

Occupation _____

Reference 2

Name _____

Address _____

City _____ State _____ Zip code _____

Telephone Number _____ Years known _____

Occupation _____

Reference 3

Name _____

Address _____

City _____ State _____ Zip code _____

Telephone Number _____ Years known _____

Occupation _____

Reference 4

Name _____

Address _____

City _____ State _____ Zip code _____

Telephone Number _____ Years known _____

Occupation _____

MURRIETA POLICE DEPARTMENT

Date: _____

Name of Applicant _____
(Please Print)

Position Applied for _____

PRE-INVESTIGATIVE QUESTIONNAIRE

As an applicant for a position with the City of Murrieta Police Department, you are required to complete the following Pre-Investigative Questionnaire as part of your background. **Answer all questions.**

As part of the questionnaire, you are admonished with the following:

"I hereby certify that all statements and answers made on this questionnaire are true and complete, and I understand that any misstatements of material facts, withholding of any information, or deception of any kind, will subject me to disqualification or dismissal."

Do you understand this admonishment? Yes _____ No _____

Do you have any questions about this admonishment? Yes _____ No _____

Applicant Signature

Date

Witness Signature

Date

CRIMINAL AND ARREST INFORMATION

Read and answer the following questions carefully and honestly. Any answers marked "Yes" will require an explanation on the attached explanation form(s), except those marked with an *.
Answers are subject to verification by a Polygraph Examination.

Have you ever committed any of the following acts?

1. Arson (intentionally set a fire) Yes___ No___
2. Burglary (entry of a structure or vehicle to commit theft or other crime) Yes___ No___
3. Robbery (theft from another person utilizing a weapon or force) Yes___ No___
4. Homicide Yes___ No___
5. Theft Yes___ No___
6. Forgery Yes___ No___
7. Kidnapping Yes___ No___
8. Extortion (blackmail) Yes___ No___
9. Embezzlement (theft of money or other valuables entrusted to you) Yes___ No___
10. Rape (sexual intercourse by force) Yes___ No___
11. Child Abuse Yes___ No___
12. Child molestation (any sex act with a child) Yes___ No___
13. Bestiality (any sex act with an animal) Yes___ No___
14. Prostitution (intercourse for money or other considerations) Yes___ No___
15. Soliciting prostitution (asking for sex in return for money or vice versa.) Yes___ No___
16. Soliciting a lewd act in a public place Yes___ No___
17. Pimping (Deriving support from a prostitute) Yes___ No___
18. Pandering (encouraging another to be a prostitute) Yes___ No___
19. Have you ever been arrested for an illegal act? Yes___ No___

20. Have you ever had sex with a member of your family (excluding spouse)? Yes___ No___
21. Have you in the past or do you now regularly associate with persons whom you know to have engaged in and/or been arrested for unlawful sexual activity? Yes___ No___
22. Have you committed any forcible sex act (sodomy, oral copulation, etc.)? Yes___ No___
23. Any violent assault upon another Yes___ No___
24. Assault upon spouse, ex-spouse or someone you had a relationship with. Yes___ No___
25. What is your true first name? _____
26. What is your true last name? _____
27. Do these names appear on your birth certificate? *Yes___ No___
28. What is your true date of birth? _____
29. Have you ever before been asked to submit to a polygraph examination? Yes___ No___
30. Has the fact that you want this job caused any conflict with your family? Yes___ No___
31. Have you ever failed to pass a polygraph examination? Yes___ No___
32. Have you placed any false information on your employment application or personal history background forms? Yes___ No___
33. Have you deliberately omitted any information on your employment application or personal history background forms? Yes___ No___
34. When you left high school, did you receive a graduation diploma? *Yes___ No___
- a. Do you have a GED? *Yes___ No___
- b. Have you passed the high school equivalency examination? *Yes___ No___
35. Would you have any reason to be concerned about an investigation into your past work records? Yes___ No___
36. Were you ever fired from a job? Yes___ No___

37. Were you ever asked to resign from a job? Yes___ No___
38. Did you ever leave a job to avoid being fired? Yes___ No___
39. Have you shown the true and complete reasons for leaving each of your previous jobs? Yes___ No___
40. Did you ever leave any job with hard feelings toward the management or co-workers? Yes___ No___
41. Do you think you could return to work for all of your former employers? If no, explain. *Yes___ No___
42. In the past year, how many times have you been late for work? _____
43. In the past year, how many days of work have you missed for reasons *other* than illness? _____
44. Have you ever worked for any other law enforcement agency in any capacity? Yes___ No___
45. Have you ever applied at any other law enforcement agency for any type of job? Yes___ No___
46. Have you ever been turned down as unacceptable by any other law enforcement agency? Yes___ No___
47. Were you ever turned down as unacceptable by the military or a draft board? Yes___ No___
48. Are you currently registered for the draft? *Yes___ No___
49. Have you ever served in any branch of the Armed Forces? (If no, skip to Question 56) Yes___ No___
50. Would you have any reason to be concerned about an investigation into your military record? Yes___ No___
51. While in the service, were you ever placed under military arrest? Yes___ No___
52. While in the service, were you ever court marshaled? Yes___ No___
53. While in the service, did you receive *any* type of disciplinary action? Yes___ No___
54. While in the service, were you ever reduced in grade or rank? Yes___ No___
55. While in the service, were you ever AWOL? Yes___ No___

56. Would you have any reason to be concerned about an investigation into your arrest record? Yes___ No___
57. As a juvenile, were you ever arrested or cited? Yes___ No___
58. As an adult, were you ever arrested or detained? Yes___ No___
59. Have you ever petitioned any court to seal or expunge a criminal or juvenile record? Yes___ No___
60. Have you ever had a warrant issued for your arrest? Yes___ No___
61. Are you now wanted for any reason by any law enforcement agency? Yes___ No___
62. Have you ever been a suspect in a crime? Yes___ No___
63. Have you ever been charged with a crime? Yes___ No___
64. Other than minor traffic matters, have you ever been fined by a court? Yes___ No___
65. Have you spent any time, either as a juvenile or an adult, locked up in a jail? Yes___ No___
66. Since you were 18 years old, have you ever shoplifted anything from a store? Yes___ No___
67. Have you ever falsified an income tax form? Yes___ No___
68. Have you ever falsified an insurance claim? Yes___ No___
69. Have you ever committed fraud by collecting unemployment or welfare benefits (including food stamps) when you were not entitled to? Yes___ No___
70. Have you ever stolen a motor vehicle? Yes___ No___
71. Have you ever been sent to jail over anything involving a motor vehicle? Yes___ No___
72. Since you were 18 years old, have you committed any serious undetected crime? Yes___ No___
73. Have you ever made serious plans to commit: Rape? Robbery? Burglary? Theft? Murder? Arson? Yes___ No___
74. Have you, within the past ten years, done anything at all that you could have been arrested for doing? Yes___ No___

75. Would you have any reason to be concerned about an investigation into your moral background? Yes___ No___
76. Since you were 16 years old, have you committed any type of sexual crime? Yes___ No___
77. Since you were 16 years old, have you thought about committing some type of sexual crime? Yes___ No___
78. Have you ever paid for sex? Yes___ No___
79. Have you ever received any type of payment for sex? Yes___ No___
80. Have you ever sexually molested a child? Yes___ No___
81. Have you ever committed a sexual act in public? Yes___ No___
82. Would you have any reason to be concerned about an investigation into your use of illegal drugs? Yes___ No___
83. Have you ever smoked or used marijuana in your life? Yes___ No___
84. Within the past 3 years, have you smoked marijuana? Yes___ No___
85. Of your knowledge, do any of your present circle of friends and acquaintances use any type of narcotic, pills or drugs? Yes___ No___
86. Within the past year, have you been in the presence of anyone else using illegal drugs? Yes___ No___
87. Have you ever illegally purchased any type of narcotic, pill or drug? Yes___ No___
88. Have you ever sold any type of narcotic, pill or drug? Yes___ No___
89. Have you ever cultivated marijuana? Yes___ No___
90. Have you ever been involved in the manufacture of any drug? Yes___ No___
91. Have you ever been the "middle man," a "go-between," or "done a favor for a friend" by becoming involved in an illegal drug transaction? Yes___ No___
92. Has anyone other than a medical person injected anything into your body? Yes___ No___

93. Is someone you are currently living with keeping any illegal drugs or substances at your residence? Yes___ No___
94. In the past three years, has someone you have lived with kept illegal drugs or illegal substances at your residence? Yes___ No___
95. Have you ever stolen alcohol? Yes___ No___
96. Do you object to others using narcotics or drugs? Yes___ No___
97. Would you have any reason to be concerned about an investigation into your honesty? Yes___ No___
98. Have you ever stolen any money from a place where you worked? Yes___ No___
99. Have you ever borrowed money from an employer and not paid it back? Yes___ No___
100. Have you ever embezzled any money from an employer? Yes___ No___
101. Have you ever had a debt turned over to a collection agency? Yes___ No___
102. Have you ever been late paying rent? Yes___ No___
103. Has your salary ever been attached for non-payment of debts? Yes___ No___
104. Have you ever had purchased goods repossessed? Yes___ No___
105. Have you ever filed bankruptcy? Yes___ No___
106. Have you ever avoided paying any lawful debt by moving away? Yes___ No___
107. Have you ever been late in paying your taxes? Yes___ No___
108. Have you ever been late in making child support payments? Yes___ No___
109. Have you ever been late in re-paying a student loan? Yes___ No___
110. Have you had a check "bounce" within the past three years? Yes___ No___
111. Have you ever borrowed money to gamble with? Yes___ No___
112. Have you ever borrowed money to pay a gambling debt? Yes___ No___

113. What is the most you have ever lost by gambling at one time? \$ _____
 Won by gambling at one time \$ _____
114. Do you feel you now have a problem with gambling? Yes ___ No ___
115. Have you ever been a plaintiff or defendant in any civil court action? Yes ___ No ___
116. Do you presently have any civil actions pending in court? Yes ___ No ___
117. Would you have any reason to be concerned about an investigation into your drinking habits? Yes ___ No ___
118. Do you drink some type of alcoholic beverage? Yes ___ No ___
119. Have you ever done anything illegal after drinking alcohol? Yes ___ No ___
120. Would you have any reason to be concerned about an investigation into your driving habits? Yes ___ No ___
121. How many traffic citations have you received in your life? _____
122. Have you ever had a warrant issued for your arrest? Yes ___ No ___
123. Have you ever had a traffic citation that did not show on your California DMV printout? Yes ___ No ___
124. Have you ever been the driver in any traffic accident? Yes ___ No ___
125. Has your driver's license ever been suspended or revoked? Yes ___ No ___
126. Has your auto insurance ever been placed in the assigned risk pool? Yes ___ No ___
127. Has your auto insurance ever been canceled for cause? Yes ___ No ___
128. Do you now have auto insurance required by the State of California? Yes ___ No ___
129. Since being licensed to drive, has there ever been a time when you did not have insurance as required by law? Yes ___ No ___
130. Have you ever caused anyone serious injury by your operation of a motor vehicle? Yes ___ No ___
131. Have you ever caused the death of anyone by your operation of a motor vehicle? Yes ___ No ___

132. Have you ever fled the scene of a hit-and-run accident? Yes__ No__
133. Have you ever driven a motor vehicle while under the influence of:
a. Alcohol? Yes__ No__
b. Some type of drug? Yes__ No__
134. In the past month, have you ever driven a motor vehicle while under the influence of:
a. Alcohol? Yes__ No__
b. Some type of drug? Yes__ No__
135. Have you ever been arrested or cited for driving while under the influence of alcohol or drugs? Yes__ No__
136. Would you have any reason to be concerned about an investigation into your loyalty to the United States? Yes__ No__
137. Are any of your relatives, friends or associates connected to or sympathetic with terrorists or any organization detrimental to our government?
a. Are you? Yes__ No__
138. Have you, yourself, ever given any confidential information to any organization or individual that was detrimental to our government? Yes__ No__
139. Would you have any reason to be concerned about an investigation into your personnel record? Yes__ No__
140. In the past 5 years, have you been in a fight in a bar? Yes__ No__
141. In the past five years, have you been in any fight?
a. Did you start it? Yes__ No__
142. Since you were 18, have you ever struck or injured any person? Yes__ No__
143. Have you ever struck someone you were living with? Yes__ No__
144. Other than in warfare, have you ever caused serious injury to a human being? Yes__ No__
145. Other than in warfare, have you ever been involved in a violent incident such as a shooting, knifing, or fight where someone was or could have been seriously injured or killed? Yes__ No__

146. Other than in warfare, have you ever used any weapon against someone? Yes___ No___
147. Other than in warfare, have you ever caused the death of a human being? Yes___ No___
148. Do you frequently lose your temper? Yes___ No___
149. Have you ever fired a firearm when **not** on a shooting range or while hunting legally? Yes___ No___
150. Are you afraid of firearms? Yes___ No___
151. Have you ever applied for a permit to carry a concealed weapon? Yes___ No___
152. Do you feel you can take orders from your superior officers without resentment? Yes___ No___
153. Do you have any prejudices? Yes___ No___
154. Do you feel your prejudices might affect your ability to perform this job? Yes___ No___
155. Have you maliciously burned any property? Yes___ No___
156. Have you ever turned in a false fire alarm? Yes___ No___
157. Have you ever made an anonymous obscene phone call? Yes___ No___
158. Have you ever in your entire lifetime done anything at all that you are ashamed of? Yes___ No___
159. Is there some undisclosed reason why you want to be a volunteer? Yes___ No___
160. Do you know of any reason why you should not be hired by the Department for the position for which you have applied? Yes___ No___
161. Is there anything at all in your background that you have not been asked about that might eliminate you from consideration for this job if it were found out? Yes___ No___
162. Can you say in complete honesty that you have answered each question truthfully? Yes___ No___

DRUG USE QUESTIONNAIRE

163. Have you ever, during your entire lifetime, used, tried, experimented, or in any way ingested into your body any of the following drugs? (Indicate below)

Substance	No	Yes	Used Once?	Used More Than Once?	Date Last Used?
A. Marijuana or Hashish/Hash Oil					
B. Opiates/Heroin					
C. Cocaine					
D. Barbiturates					
E. Amphetamines (Crosstops, Whites, Bennies, Uppers)					
F. Methamphetamine (Speed, Crank)					
G. Crack/Ice					
H. LSD or other hallucinogen including mushrooms					
I. PCP (Angel Dust, Sherms)					
J. Steroids					
K. Used a pharmaceutical drug prescribed for another person Type _____					

164. Name *any* other illegal drug, narcotic or controlled substance not listed above that you have ingested (example: glue sniffing, Jimson weed, etc.):

If the answers to any of the following questions are "yes", explain fully on lined paper.

165. Have you ever injected an illegal drug into your body? Yes___ No___
166. Have you ever sold any illegal drug(s)? Yes___ No___
167. Have you ever participated in the manufacture, cultivation, or production of any drug, narcotic or controlled substance? Yes___ No___
168. Have you ever acted as a courier by transporting any drug, narcotic or controlled substance for other than legitimate purposes? Yes___ No___
169. Have you ever told anyone else where to purchase illegal drugs? Yes___ No___
170. Have you ever "held" or temporarily stored any drug, or controlled substance for yourself or anyone else? Yes___ No___
171. Are any illegal drugs in your:
- a. Home? Yes___ No___
 - b. Car? Yes___ No___
 - c. In your possession? Yes___ No___
172. Have you *ever* been present when illegal drugs were being used, possessed, or sold? (Not in the course of your duties as a law enforcement officer.) Yes___ No___
173. Have you ever used illegal drugs or controlled substances? (If so, provide explanation for first time use on attached forms) Yes___ No___
174. Have you ever been drunk? (If so, indicate when & circumstances on attached form) Yes___ No___

GANG ACTIVITIES, RELATIONSHIPS

Give name of gang or gangs you have had any kind of contact relationship or membership with when answering these questions.

Provide your age and/or dates on attached explanation form(s).

175. Have you ever been a member or associate of any street gang? Yes___ No___
176. Has any member of your family ever been a member of a street gang, or knowingly associated with a member of any street gang? Yes___ No___

177. Have you ever attended a gathering or meeting of any street gang? Yes___ No___
178. Have you ever participated in any gang, or gang related activity, including car washes? Yes___ No___
179. Have you ever been present when any kind of gang activity, lawful or unlawful, took place? Yes___ No___
180. Have you ever violated any law while associating with a member of a street gang? Yes___ No___
181. Have you ever been detained, or questioned by any law enforcement agency while in the company of a member or members of a street gang? Yes___ No___
182. If a records check was made of files containing known street gang member, or persons associating with street gang member, would your name, or nickname appear? Yes___ No___

CERTIFICATION:

I hereby certify that all statements made and information provided to background investigators in this questionnaire are true, accurate, and complete. I have not withheld or failed to disclose any information. I understand that any misstatement of material facts, deception of any kind, or making/providing any misleading statements, will subject me to disqualification or dismissal.

Applicant Name Printed: _____

Applicant Signature: _____

Date: _____

CITY OF MURRIETA



Police Department: 24701 Jefferson Ave., Murrieta, CA 92562
Telephone: (951)-304-COPS (2677) Fax: (951)-696-3608

AUTHORIZATION TO RELEASE INFORMATION

As an applicant for a civilian volunteer program with the Murrieta Police Department, I respectfully request and authorize you to furnish the Murrieta Police Department, or its representative, any and all information that you may have concerning me, my work reports, including all information of a confidential or privileged nature.

This information is to be used to assist the department in determining my qualifications and fitness for the position that I am seeking with the Murrieta Police Department.

I hereby release you, your organization, or your employer or agents from any liability to damages which may result from the furnishing of the information requested above.

This waiver will expire 18 months after the date signed. A photocopy of this document may act as the original.

Applicant's signature: _____ Date: _____

Witness's signature: _____ Date: _____

Notice to company/organization: You may retain this form for your records.

CITY OF MURRIETA



Police Department: 24701 Jefferson Ave., Murrieta, CA 92562
Telephone: (951)-304-COPS (2677) Fax: (951)-696-3608

BACKGROUND INVESTIGATION DISCOVERY WAIVER

Name: _____

Address: _____

Position Applied For: **Police Volunteer**

Date: _____

I understand that this background investigation is done for volunteer employment purposes only. It is to assess qualifications for this specific employment and is in no way to be construed as intended for any other purpose.

I understand that I will be given no feedback or results other than being notified of 'accepted' or 'not accepted'. I also acknowledge that these results are confidential and will be the property of the City of Murrieta Police Department and will not be made available to any other police agency or employer without a Personal Information Waiver signed by me.

If I am not recommended for this position, I understand that this means only that I do not meet the standards established for the position for which I have applied.

Applicant's signature: _____ Date: _____

Witness's signature: _____ Date: _____

CITY OF MURRIETA

Police Department • 24701 Jefferson Avenue • Murrieta, California 92562
Telephone: 951.304.COPS (2677) • Fax: 951.696.3608 • Web: www.murrieta.org



RIDE-ALONG PROGRAM

The Murrieta Police Department has an on-going citizen Ride-Along Program and welcomes the residents of our community to participate in an interesting experience. All citizens living in the City of Murrieta, working in the community, or potential lateral applicants for a position with our agency are encouraged to participate in this meaningful program.

The Murrieta Police Department encourages citizen involvement in the community. We truly believe it is the enlightened citizen who makes our job more meaningful and successful. We want to build strong communication and cooperation with you. We are dedicated, as your public servants, to providing the highest level of service possible. By allowing you to see, firsthand, how we provide our services and the challenges we are facing, we believe our relationship with our community can do nothing but grow. You can help us win the fight against crime.

The following guidelines will enlighten you as to our ride-along policy and provide pertinent information:

Ride-alongs are scheduled in four hour increments from 7:00 pm to 11:00 pm.
Advise the Watch Commander which day you would like to ride.

It will be necessary for you fill out a Ride-Along Information Sheet and sign a waiver releasing responsibility to the City of Murrieta. Persons under the age of 18 years will require the signature of a parent or legal guardian. **Unfortunately, persons under the age of 16 years are excluded from participation.**

Because of time and manpower constraints, we must limit ride-alongs to once every 6 months.

We request you dress in casual clothing; however, Levis and Tee-Shirts, etc. are not allowed. On evening rides, make sure you bring a coat, especially in the winter months.

Please adhere to these guidelines and instructions from the officer. The ride-along is a privilege and may be terminated at our discretion.

If there are any concerns you may have, please feel free to contact the on-duty Watch Commander at: 304-COPS (2677), extension 6797.

Thank you for your inquiry and interest in our Ride-Along Program. We hope your ride-along with one of our police officers will be an interesting and rewarding experience.

Good Luck! We hope you have an enjoyable evening.

Murrieta Police Department

(The following (2) page form must be completed and turned in to the Murrieta Police Department)

AGREEMENT ASSUMING RISK OF INJURY OR DAMAGE

WAIVER AND RELEASE OF CLAIMS AND INDEMNITY AGREEMENT

WHEREAS

I,

(BEING/NOT BEING) the age of eighteen and not being a member of the Police Department of the City of Murrieta, have made a voluntary request to ride as a guest in a vehicle assigned to the Murrieta Police Department and to accompany a member or members of the Police Department during the performance of their official duties, and

WHEREAS, the Police Department of the City of Murrieta is willing to allow me to ride as a guest in a vehicle assigned to the department and to accompany a member or members of the Department during the performance of their duties on the following conditions:

NOW, THEREFORE, in consideration of the permission given me to ride in a vehicle assigned to the Murrieta Police Department and to accompany a member or members of said Department during the performance of their official duties, I do hereby agree:

1. That I am aware that the work of the Police Department is inherently dangerous and that I may be subjected to the risk of personal injury, death or property damage arising from or in any way connected with the use of said vehicle or in connection with any other activities, in the performance of said duties, and before and after said performance, whether resulting from or concerning violence, speed, assault, riot, breach of peace, fire, explosion, gas, electrocution, the escape of radioactive substances, other wrongful or criminal act, or any other occurrences or matters while accompanying or observing or in any manner related to the activities of a member or members of the Police Department. I voluntarily and knowingly assume all of these risks.

_____ Initials

2. That the City of Murrieta, the Chief of Police of the Murrieta Police Department, his sureties, all members of the Police Department of the City of Murrieta, their sureties, employees of the City and its agents and representatives, and each of them, shall not be responsible or liable for any injury, death, damage, loss or expense, either to me or my property, or to my heirs, dependents, or representatives, incurred while or as a result of riding in any vehicle assigned to the Murrieta Police Department or otherwise incurred while or as a result of accompanying or observing or in any manner relating to the activities of any member or members or employees or agents of the Murrieta Police Department or of the City of Murrieta whether or not caused by or resulting from any negligent or wrongful act or omission on the part of any member or employee or agent of the Murrieta Police Department or of the City of Murrieta or from any dangerous condition of public property or other cause. I voluntarily and knowingly assume these risks, and by my consent agree that no action will be brought against said City, Department, Chief of Police, members, sureties, or City employees, agents or representatives arising out or resulting from or concerning any negligent or wrongful act or omission, dangerous condition or other cause.

_____ Initials

3. For myself, my heirs, executors, administrators and assigns to hold harmless, defend (with attorneys approved by the city) and indemnify the City of Murrieta, the Chief of Police of the City of Murrieta, all members of the Police Department of the City of Murrieta, their sureties, and city's employees, agents, and representatives, and each of them, against any and all matters or actions, causes of actions, suits, debts, claims, demands or damages or liability or expenses of every kind and nature incurred or arising by reason of any actual or claimed negligent or wrongful act or omission of mine while riding in any vehicle assigned to the Police Department of the City of Murrieta or while accompanying any member or members of said Police Department during the performance of their official duties.

_____ Initials

I hereby verify that I have carefully read and understand the contents of this document and sign the same of my own free will.

Date: _____ Signature: _____
Print name: _____

Signature of authorized Parent or Guardian, confirming and agreeing to the above, if applicant is a minor:

Date: _____ Signature: _____
Print name: _____

RIDE-ALONG INFORMATION

NAME:

HOME ADDRESS:

BUSINESS
ADDRESS:

HOME PHONE: _____ BUSINESS PHONE: _____

DATE OF BIRTH: _____ DRIVERS LICENSE #: _____

REASON YOU DECIDED TO RIDE-ALONG:

