

# University of Maryland, College Park Police Department

## Ride Along Consent and Release Agreement

I, \_\_\_\_\_, hereby acknowledge that accompanying a University of Maryland police officer in the Ride Along Program may subject me to the inherent risks of police patrolling including but not limited to, the risk of personal injury or death, or damage to my personal property. In consideration of being permitted to participate in the University of Maryland Police Department (UMPD) Ride Along Program, I voluntarily assume all risks of loss, damage, illness, or injury to my person or property from any and all causes including but not limited to, negligence acts, omissions, or misconduct by the UMPD, its officers, agents and employees, riding in State vehicles, acts of perpetrators or suspected perpetrators, or other situations that may occur on the ride along. Further, on behalf of myself and my heirs and assigns, I release, indemnify and hold harmless the University of Maryland, the State of Maryland, its officers, agents, and employees from any and all liability, claims, demands, and causes of action whatsoever in law or equity, before any administrative agency or judicial tribunal against the University of Maryland or State of Maryland, arising out of or relating in any manner to any loss, damage, illness, or injury resulting from my participation in the Ride Along Program. The Ride Along Program may also include "Walk Alongs."

As further consideration of being permitted to participate in the Ride Along Program, I agree to read, familiarize myself with, and abide by the Program Guidelines that I have read online or that may be attached hereto.

I further understand and agree that my participation in the Ride Along Program is for my personal edification and should not in any way be construed as constituting employment with the University of Maryland or to entitle me to any University employment benefits including, but not limited to, Workers' Compensation, health insurance, leave, or any other benefits..

I further understand and agree for the considerations aforesaid that I will not in any manner hinder or attempt to assist any law enforcement officer or UMPD employee in the performance of his/her official duties, which may occur or ensue during the time I am accompanying an officer or UMPD employee pursuant to the Ride Along Program.

Further, if during my participation in the Ride Along Program I witness an occurrence or otherwise become privy to information that may assist the UMPD in its investigation of an incident or may be presented in evidence at a trial associated with an incident, I agree to provide UMPD with such information and to appear as a witness at trial should I be requested to do so. I agree not to reveal any confidential information including but not limited to, names or other personally identifiable information of any victims, suspects, arrestees, or witnesses to any incident or arrest, or to reveal any information that might jeopardize or impede the successful investigation of an incident or crime, or the successful prosecution of a suspect; I also will not reveal the names of seriously injured or deceased persons prior to notification of next of kin. I further understand and agree that I will not disseminate or publish, whether by private conversation, social media websites, or by any other means, any police-related information that I hear or observe while I am **actively** participating in the Ride Along Program. I further understand and agree that I will not be permitted in high-risk crime scenes or secure areas of the police station, to include but not limited to: Watch Commanders, the Temporary Holding Facility, Communications office, etc.

I further understand and agree that I will not be permitted to have cameras or recording devices and may not take any type of pictures, videos, or audio recordings with any cell phones or other devices, unless it has been specifically approved by the Ride Along coordinator, PIO, patrol's bureau commander, or the Office of the Chief prior to the ride along being approved. I understand I will not be permitted to follow officers into the station with a prisoner and may not be in arrest processing areas with a prisoner. If the officer has a prisoner, I will be directed to the public entrance of the police station to wait for the officer in the lobby. If it appears the officer will be delayed for an extended period of time, I may be assigned to continue the Ride Along Program with another officer or my Ride Along may be discontinued.

I declare and affirm that I have read and voluntarily signed this document with full knowledge of its significance. I further state that I am either 18 years of age or older and competent to sign this Consent and Release Agreement, or that I have discussed this with my parents/legal guardian, who by their signature below agree with my decision to participate and to all of the terms and conditions stated above.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Witness Name (Printed)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent  
(If Applicant is under 18 years of age)

\_\_\_\_\_  
Parent Name (Printed)

\_\_\_\_\_  
Date

### FOR UMPD USE ONLY

Officer Providing Ride Along: \_\_\_\_\_ ID #: \_\_\_\_\_ Squad: \_\_\_\_\_

Date of Ride Along: \_\_\_\_\_ Start Time: \_\_\_\_\_ hrs. End Time: \_\_\_\_\_ hrs.

Ride Along Case Number: \_\_\_\_\_ Cruiser #: \_\_\_\_\_

Reviewing Supervisor's Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Program Coordinator's Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

CX