



Syracuse University
Department of Public Safety
Ride-Along Program Waiver

Syracuse University faculty, staff and students are eligible to participate in the Department of Public Safety's "Ride-Along Program" upon completion and approval of the DPS Ride-Along Program Waiver form.

I, Participant Name, in consideration of being given the opportunity to observe operations and functions of the Syracuse University Department of Public Safety by riding in a vehicle operated by a member of said organization, by accompanying the member on foot patrol, and by any and all other means of observation whatsoever, agree as follows: (1) I recognize that there are risks inherent in the enforcement and other duties of the members of the Department of Public Safety and my proximity to the members may put me at risk or injury; and (2) I assume any and all risks encountered by my participation in the observation program and release and forever discharge Syracuse University, its trustees, officers, employees, agents and all other personnel from and against any and all liability whatsoever for any injuries, damages, losses and claims that I, my heirs, dependents, executors and assigns may sustain in and about and resulting from any University patrol vehicle or in any way connected with the observation program and studies of the operations and functions of the Syracuse University Department of Public Safety.

Observation Date/Time Frame \_\_\_\_\_ DPS Vehicle Number \_\_\_\_\_

Reason for Ride-Along \_\_\_\_\_

Approval by Commander or designee (please check one) [ ] YES [ ] NO

Name \_\_\_\_\_ Signature \_\_\_\_\_

ID Verification

ID Type \_\_\_\_\_ ID Number \_\_\_\_\_

Participant Name \_\_\_\_\_ Signature \_\_\_\_\_

Officer Name/Badge \_\_\_\_\_ Signature \_\_\_\_\_

Officer Name/Badge \_\_\_\_\_ Signature \_\_\_\_\_

Officer Name/Badge \_\_\_\_\_ Signature \_\_\_\_\_

Witness

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

Parental or legal guardian signature also required if participant is less than 18 years of age.

Parent Name \_\_\_\_\_ Signature \_\_\_\_\_