

JOLIET POLICE DEPARTMENT RELEASE AND COVENANT NOT TO SUE

In exchange for the opportunity to observe and participate in the authorized operations of the City of Joliet Police Department, which activity may place me in a position of danger, the undersigned agrees to:

1. release and waive any and all claims, causes of action, or other means of legal recourse that the undersigned may have against the City of Joliet and its officials, agents, and employees that may arise from or be caused by my participation in the authorized operations of the Police Department;
2. indemnify, hold harmless, and defend the City of Joliet and its officials, agents, and employees for any and all claims, causes of action, or other means of legal recourse that may arise from or be caused by my participation in the authorized operations; and
3. not sue the City of Joliet and its officials, agents, and employees and its officials, agents, and employees for damages that may arise from or be caused by my participation in the authorized operations.

By signing this document, the undersigned acknowledges that he/she is not and will not be acting as an employee or agent of the City of Joliet and is specifically waiving, in addition to the waiver set forth above, any right to worker's compensation benefits. The undersigned further acknowledges that the release, waiver, hold harmless, and covenant not to sue shall be binding on the undersigned's heirs and personal representative. The undersigned further acknowledges that permission to observe and participate in authorized operations is terminable at the will of any City official, agent, or employee without notice or formal process and that this release and hold harmless shall be applicable whenever the undersigned is observing or participating in authorized operations.

The undersigned acknowledges that the execution of this release is done as a free and voluntary act.

Dated this _____ day of _____, 20_____.

NAME (First, Middle Initial, Last)		ADDRESS	
CITY/STATE/ZIP		HOME TELEPHONE NUMBER	CELLULAR TELEPHONE NUMBER
EMAIL ADDRESS		DATE OF BIRTH	AGE
PLACE OF EMPLOYMENT OR SCHOOL CURRENTLY ATTENDING		OCCUPATION OR FIELD OF STUDY	
DRIVER'S LICENSE NUMBER		SIGNATURE	
BACKGROUND CHECK INFORMATION (INCLUDING LEADS; CQH; LRMS) COMPLETED & ATTACHED TO SHEET BY			
SHIFT/UNIT HEAD APPROVAL			
DIVISION COMMANDER (or Designee) APPROVAL			
DATE/TIME OF RIDE-ALONG			
OFFICER ASSIGNED			