

**REQUEST FOR PARTICIPATION IN THE  
CRIMINAL JUSTICE FACILITY OBSERVATION ACTIVITY  
AND WAIVER OF LIABILITY**

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

I request the opportunity to participate in the Fresno Regional Occupational Program Criminal Justice Ride Along Facility Observation activity. It was explained to me prior to enrolling in the Criminal Justice course that the participation in this activity is part of the requirements. It was also explained to me that a portion of the course involves dangerous activities of riding in police vehicles and observing. I understand that being present in police vehicles or at emergency facilities I may be subjected to a variety of possible dangers and risks, including those associated with traffic, emergency rescue situations, the scene of a crime and other risks related to emergency responses as well as being present where traumatic events take place involving victims, concerned bystanders and law officials.

In consideration of the acceptance of my request for participation in this activity, I hereby waive, release and discharge any and all claims for damages for death, personal injury or property damages which I may have or which may hereafter accrue to me, as a result of my participation in this activity.

This release is intended to discharge in advance the Fresno Regional Occupational Program the \_\_\_\_\_ Police Department, the Fresno County Superintendent of Schools and the Fresno County Board of Education, their respective agents and employees, from and against any and all liability arising out of or connected in any way with my involvement with the Criminal Justice course including, but not limited to, police ride alongs or emergency treatment observation, or any other activity relating to the course.

I further understand that serious accidents occasionally occur during a police ride along in response to an emergency situation and that participants, even as observers, occasionally sustain mortal or serious personal injuries and/or property damage as a consequence thereof. Knowing the risks of these activities and involvement, I hereby agree to assume these risks and to release and hold harmless all of the persons or entities mentioned above who through no negligence or carelessness of their own might otherwise be liable to me or my heirs or assigns for damages.

It is further understood and agreed that this Waiver of Liability (Waiver, Release and Assumption of Risk) is binding on my heirs and assigns.

I agree to accept and abide by the rules and regulations of the Fresno County Superintendent of Schools, the Fresno County Board of Education and the Fresno Regional Occupational Program.

**I, THE UNDERSIGNED, HAVE READ, UNDERSTAND AND VOLUNTARILY SIGN THIS RELEASE AND WAIVER OF LIABILITY.** I understand that by signing this form, I may be waiving valuable legal rights.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Age

\_\_\_\_\_  
Signature of parent of minor student

\_\_\_\_\_  
Date