



# STAFFORD POLICE DEPARTMENT

2702 South Main Street

Stafford, Texas 77477-5599

PHONE: (281) 261-3950

**STATE OF TEXAS**

**COUNTY OF FORT BEND**

## RELEASE

Know all men by these presents that I, \_\_\_\_\_, of \_\_\_\_\_ County, Texas, in consideration of being allowed to accompany the Stafford Police Department on official patrols, do by these presents for myself, my heirs, executors, administrators, and assigns, hereby release and agree not to hold liable, the City of Stafford, its officers, agents and employees from any and all actions, causes of action, claims, demands, costs or damages arising from or resulting from property damage, personal injuries or death sustained by me or my property while accompanying him, her or them.

I further agree by these presents for myself, my heirs, executors, administrators, and assigns, to indemnify, hold and save harmless the City of Stafford, its agents, officers and employees, from any liability, action, claim, damage, award or judgment incurred or suffered by the city or individuals as a result of any act or omission by me or caused by me while accompanying any employee, agent or officer of the city.

In addition, I make the following representations and acknowledgments upon which I intend the city to rely: (1) I am of lawful age; (2) I understand and agree that while accompanying any officer, agent, or employee of the city during his law enforcement rounds, I am to be only an unarmed law observer and bystander with no active role whatever and that I will have and am given no duties, rights, powers, or authority whatever other than those conferred by law upon any other person in like or similar circumstances as may arise from time to time and will under no circumstances interfere with city officers or offer any advise or counsel to any person being questioned, investigated, taken into custody or arrested by any city officer; (3) neither will I be considered an agent, servant, or employee of the City of Stafford, and thus, I will not be covered by the city for any workers' compensation, death or disability benefits; (4) I realize that I may and will at unpredictable times be placed in both foreseeable and unforeseeable positions or considerable danger and agree that neither the city nor any of its officers or employees shall be obligated to take any steps or actions to protect my person or provide a means of

withdrawal or retreat for me, and I hereby release them of any duty to do so intending hereby to willfully and voluntarily assume all risks inherent in any situation and under any circumstances that may arise incident hereto; (5) I agree that any information I may gain will be used by me only for my personal education purposes except where I am summoned as a witness in any administrative or court proceeding;

I hereby authorize the Stafford Police Department to perform any background check deemed necessary to verify that I have no criminal record.

I have carefully read this release, I understand its purpose and effect, and I have signed as my own free act.

Witness my hand the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Signature)

Before me, the undersigned authority, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared before me \_\_\_\_\_, known to me to be the persons whose name is subscribed to the foregoing release, and being first duly sworn declared and acknowledged to me that he freely and voluntarily executed the foregoing release for the purposes and considerations therein expressed.

Given under my hand and seal of office, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS

Date: \_\_\_\_\_

Chief of Police,

This letter is to request that \_\_\_\_\_ be given permission to ride on \_\_\_\_\_ from \_\_\_\_\_ am / pm to \_\_\_\_\_ am / pm with Officer \_\_\_\_\_ . The rider is not a commissioned peace officer, but has requested the opportunity to ride with the Stafford Police Department. If you have any questions or comments please contact me.

**Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Drivers License #:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Reason for Request:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Thank you.

**SUPERVISOR:**      APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_

**CHIEF:**              APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_