

BOROUGH OF QUAKERTOWN POLICE DEPARTMENT

35 NORTH THIRD STREET
P.O. BOX 727
QUAKERTOWN, PENNSYLVANIA 18951
215-536-5002 ● FAX: 215-536-5140

Scott C. McElree Chief of Police

<u>CIVILIAN RIDE ALONG PROGRAM</u> WAIVER OF LIABILITY/CONFIDENTIALITY STATEMENT

Ι,	_, hereby certify that I will release the Borough of
Quakertown, the Quakertown Borough	n Police Department and all officers and agents
thereof from any and all liability arisin	g from my participation in the Quakertown Borough
Police Department Civilian Ride Along	g Program.
I further certify that I fully und	erstand the risks and dangers associated with Law
Enforcement, and that I fully accept those risks and dangers during my participation in the	
program. I also understand that the program is voluntary, and that I may terminate my	
participation in it at anytime.	
As part of a background investi	igation conducted prior to my participation in the
program, I agree to release any personal records requested by the Quakertown Borough	
Police Department. I further agree to re	elease the above listed officials from any and all
liability arising from the release of thos	se records.
Ride Along Participant	Host Officer
Date	Date