



City of Cambridge Police Department

TELEPHONE
(617) 349-3300

WEB
www.cambridgepolice.org

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Christine A. Elow
Police Commissioner

Yi-An Huang
City Manager

CITY OF CAMBRIDGE POLICE DEPARTMENT **CITIZEN RIDE-ALONG** **HOLD HARMLESS AGREEMENT AND RELEASE**

Participant's Name, Address, and Phone # (PLEASE PRINT LEGIBLY):

Activities: "Ride-Along" with Cambridge Police Patrol Officers

I, _____, in consideration of the opportunity to participate in the Ride-Along program conducted by the City of Cambridge Police Department, a program in which civilians are permitted to ride with an officer while on patrol, on _____ (date), hereby agree and acknowledge as follows:

1. I understand that participation in a Ride-Along involves potential exposure to inherently dangerous situations encountered by police officers in the course of their duties, and may involve unavoidable risk of injury to participants or damage to property.
2. In consideration of the opportunity to participate in the Ride-Along, I agree to hold harmless and indemnify the City of Cambridge, the Cambridge Police Department, and its employees, volunteers, agents, successors, heirs, estates, executors, administrators, and assigns from any and all claims, demands, actions, damages and liabilities whatsoever which may directly or indirectly result from or be related to any loss, damage or injury that may be sustained by me or my property, or sustained by any other person or property, in connection with my participation in the Ride Along.
3. I further agree to release and forever discharge the City of Cambridge, the Cambridge Police Department, their employees, volunteers, agents, successors, heirs, estates, executors, administrators and assigns, from all such claims, demands, actions, damages and liabilities whatsoever, which I may have, whether foreseen or unforeseen, on account of my participation in the Ride-Along.

4. This release and discharge shall be binding upon the successors, heirs, estates, executors, administrators and assigns of the undersigned.

5. I certify that I am over the age of eighteen (18) years and have no medical, psychological or physical conditions that could interfere with my safety in the Ride-Along activities and that I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.

6. I agree to abide by the Cambridge Police Department Citizen Ride-Along Regulations, which are attached to this Agreement and Release.

7. I, _____, acknowledge that I have read and fully understand this Agreement and Release, and the attached Regulations, and that I have signed below voluntarily.

Participant

Witness

Date

Emergency Notification Information:

Name _____

Address _____

Phone # _____



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RIDE-ALONG PROGRAM

The Cambridge Police Department is pleased to hear of your interest in the Ride-Along Program. The purpose of this program is to provide an opportunity for interested members of the public to experience and gain insight into the operations of the department firsthand. The Ride-Along Program is restricted to applicants who are **members of the community, students, or non-sworn employees of the city**. It is at the discretion of the department to accommodate applicants who are not residents of Cambridge. The Ride-Along Program is under the supervision of the Program Administrator, the Superintendent of Operations, and both the application form and liability waiver must be returned to his/her attention. It is the Cambridge Police Department's hope that you will find this experience both informative and enjoyable.

The following are the conditions and circumstances under which the Ride-Along Program operates:

1. You will be assigned to ride with a Patrol Officer of this Department. He/she will be assigned to his/her normal duties and will respond to all calls for service to which he/she is dispatched. Prior to entering the cruiser, the officer will notify the Emergency Communications Department that the ride-along is beginning and will provide your name, address, and emergency contact information to the Shift Commander.
2. The officer whom you are riding with is still responsible for performing his/her assigned duties and will not disregard these services simply because you are accompanying him/her. In situations where, based on the officer's best judgement, the call for service does not present a risk to your safety, you are permitted to observe the officer's response to the situation.
3. You shall not become involved in any investigation, handling of evidence, discussions with the involved parties (such as the victims or suspects), or handling of any police department equipment. When a situation could potentially cause undue stress or embarrassment to a victim or another person, you will not be permitted to be present in the service area. In such event that the officer's services are needed inside a private residence, you shall not enter the private residence prior to receiving the express consent of the primary occupant or other authorized person of the residence.
4. Patrol Officers can be and are often assigned duties, which involve danger and/or serious risks. While every effort will be made to ensure your safety, the Police Officer's first responsibility will be to carry out his/her assigned duties. If, in the officer's best

judgement, a situation presents a risk to your safety, the officer will have you exit the cruiser in a well-lit area and advise the Emergency Communications Department to dispatch another cruiser to pick you up as soon as possible. While the goal is to continue the ride-along once you are returned to your assigned officer, the ride-along may need to be terminated based on uncontrollable circumstances.

5. You may terminate the ride-along at any time and request that the officer return you to your home or the police department. The officer may terminate the ride-along if it interferes with the performance of his/her duties.
6. The Police Officer you accompany will be happy to discuss his/her duties and responsibilities or answer any questions you have if time permits. Throughout the duration of the ride-along, you are expected to immediately and without question, comply with any orders or directions given to you by the officer.
7. Due to the nature of police work, your participation in the Ride-Along Program enables the possibility of being called as a witness in an incident that occurred during the ride-along, and your name may be included in the official police report. Police report writing is one of the primary responsibilities of a patrol officer and serves as documentation for each call for service that they responded to. Such reports may cause you, an observer of the incident response, to be subpoenaed in court as a witness.
8. Under the Cambridge Police Department's Body Worn Camera policy, all Police Officers are required to wear body worn cameras, which your assigned officer and all other officers responding to a call for service will likely need to activate. These recordings serve to enhance agency transparency and accountability, as well as documentation and digital evidence. These recordings can be requested by members of the public (under the Public Records Act) or serve as evidence in court. Participation in this program means you consent to the possible chance of being video recorded and disseminated pursuant to department policy, and state and federal law.

RULES OF CONDUCT:

- You shall always follow the directions of your assigned officer
- In compliance with the Massachusetts state law, the participants shall wear their seat belt appropriately while the cruiser is in motion, but may remain without the seat belt while the cruiser is parked
- For participant safety, as well as the safety of all involved in the program, under **NO circumstances will the participant carry a weapon of any kind, or any object that could be construed as a weapon. This includes weapons prohibited by law or otherwise permitted, including but not limited to firearms, self-defense spray, or pocketknives**
- Participants may be required to wear body armor at the discretion of the Shift Commander
- The use of cameras, recording devices and/or cell phones, and social media platforms are strictly prohibited during any ride-along without prior written approval of the Office of the Police Commissioner

- Participants shall not arrive with the odor of alcohol on their breath, appear or be intoxicated or under the influence of drugs, or have taken medication that may impair judgement or the ability to follow directions
- Participants who are off-duty officers shall not present themselves as police officers or participate in any enforcement activity unless emergency circumstances dictate otherwise
- Participants are required to be appropriately groomed and dressed for the ride-along.

ELIGIBILITY REQUIREMENTS:

- Applicants must be 18 years of age or older and be either a Cambridge resident, student, or a non-sworn employee within the city
 - Consideration of an applicant that cannot fulfill this requirement is determined on a case-by-case basis by the Commissioner or designee
 - Off-duty police officers, whether from the Cambridge Police Department or another police department, are not authorized to participate in the Ride-Along Program without express permission from the Commissioner or designee
- Applicants must complete and submit a ride-along application and liability waiver form to the program administrator
 - Applications can be downloaded from www.cambridgema.gov/Departments/cambridgepolice/iwantto/requestaridealong
 - Additional ways to get to the application:
 - Go to the Cambridge Police Department website’s main page, go to the “I Want To” dropdown menu in the top right of the page, click “View CPD All I Want To’s” and scroll to “Request Ride Along”
 - Go to the Cambridge Police Department website’s main page, go to the search bar in the top right corner and type in “Request Ride Along”, and then press the magnifier glass to populate search results
 - The application requires the submission of the following information:
 - A copy of a valid ID or driver’s license
 - Current address
 - Telephone number
 - Applications must be received by the program administrator at least 7 days prior to when the ride-along will be scheduled
 - **WALK-IN APPLICATIONS WILL NOT BE ACCEPTED**
- All applicants are subject to approval and a criminal history check, including CJIS and NLETS record checks, by the Cambridge Police Department. The program administrator will send a notification of acceptance to the applicant by mail or email

Participants whose applications are approved are limited to one ride-along every six months. Ride-Alongs shall be limited to two hours and may be extended at the discretion of the assigned officer and the approval of the Shift Commander. There will be no more than one participant in a cruiser at any given time.



CAMBRIDGE POLICE DEPARTMENT RIDE-ALONG PROGRAM APPLICATION

TELEPHONE: 617-349-3235

MAIL, EMAIL, OR FAX COMPLETED APPLICATION

TO: SUPERINTENDENT PAULINE WELLS
 CAMBRIDGE POLICE RIDE-ALONG PROGRAM
 125 SIXTH ST, CAMBRIDGE MA
 EMAIL: PIO@CAMBRIDGEPOLICE.ORG



FULL NAME (FIRST, MIDDLE, LAST, SUFFIX)				CURRENT ADDRESS				CITY, STATE, ZIP CODE			
EMERGENCY CONTACT NAME (FIRST, LAST, SUFFIX)						EMERGENCY CONTACT TELEPHONE NUMBER					
HOME TELEPHONE NUMBER			CELLULAR TELEPHONE NUMBER			EMAIL ADDRESS					
DATE OF BIRTH (MONTH/DAY/YEAR)		SEX		PREFER NOT TO DISCLOSE	RACE		DRIVER'S LICENSE OR STATE ID NUMBER			STATE THAT ISSUED DRIVER'S LICENSE OR STATE ID	
		MALE	FEMALE	<input type="checkbox"/>							
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
OCCUPATION				AGENCY/SCHOOL							
TIME PERIOD REQUEST (CHECK MARK)				PREFERRED DAY(S) OF THE WEEK (CHECK MARK)							
BETWEEN 7AM – 3PM		BETWEEN 3PM – 11PM		SUN.	MON.	TUES.	WED.	THURS.	FRI.	SAT.	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
DO YOU HAVE ANY MEDICAL, PHYSICAL, OR MENTAL CONDITION THAT MIGHT AFFECT YOUR PARTICIPATION IN OUR RIDE-ALONG PROGRAM?									YES	NO	
IF YES, DESCRIBE:											
ARE YOU CURRENTLY TAKING ANY MEDICATIONS THAT HAVE CAUSED ANY SIDE EFFECTS?									YES	NO	
IF YES, DESCRIBE:											
HAVE YOU PARTICIPATED IN THE RIDE-ALONG PROGRAM BEFORE?									YES	NO	
IF YES, APPROXIMATE DATE:											
PLEASE EXPLAIN YOUR REASON FOR WANTING TO PARTICIPATE IN OUR RIDE-ALONG PROGRAM.											

*****PLEASE ATTACH A COPY OF YOUR DRIVER'S LICENSE OR STATE ID AFTER THIS PAGE. IF YOU ARE A STUDENT, PLEASE ATTACH A COPY OF YOUR STUDENT ID CARD AS WELL**

I, _____ acknowledge with my signature that I have read and understand the Ride-Along Program Procedures and Rules and authorize the Cambridge Police Department to conduct a criminal history check of me, as required to be eligible for the program. I understand that I could be denied acceptance to the program if I have a prior criminal history, pending criminal action, or a pending lawsuit against the Cambridge Police Department or any other police department—which can be discovered through a criminal history check. While I may request a specific day or time for the ride-along, I understand that it is up to the program administrator to choose/schedule a date based on availability. I am also aware that a copy of this application will be forwarded to various units within the Cambridge Police Department for record-keeping and scheduling purposes.

 APPLICANT SIGNATURE

 DATE SIGNED

 WITNESS SIGNATURE

BELOW SECTION FOR POLICE OFFICIAL USE ONLY

SIGNATURE OF APPROVING OIC & BADGE #	DATE OF CRIMINAL HISTORY CHECK	CRIMINAL HISTORY? YES (ATTACH TO APPLICATION) <input type="checkbox"/>	NO <input type="checkbox"/>	APPLICATION APPROVED <input type="checkbox"/>	REJECTED <input type="checkbox"/>
	DATE APPROVED/REJECTED	RIDE-ALONG DATE AND TIME	OFFICER ASSIGNMENT		