

RELEASE AND WAIVER OF LIABILITY

CHP 428 (Rev. 11-11) OPI 013

ACKNOWLEDGEMENT

In consideration of being permitted to ride in a California Highway Patrol vehicle or aircraft, the undersigned assumes all the risks of damage or loss either to person or property from all and every cause, including negligence, violation of law, or willful misconduct on the part of the California Highway Patrol, its officers, employees, appointees, or agents during such ride or as an incident thereto, or in connection therewith, it being the understanding that the State of California, the California Highway Patrol, its officers, employees, appointees, or agents, incur no liability or obligation to the undersigned, his/her heirs, successors or assigns other than to permit him/her to ride in such vehicle or aircraft at such times as may be mutually agreed upon. This waiver applies to each and every ride which the undersigned may take in a California Highway Patrol vehicle or aircraft on the undersigned date and/or shift.

MEDIA PARTICIPANTS ONLY

_____ agrees to indemnify and hold harmless the California Highway Patrol, the State of California, and all personnel thereof, named or unnamed, in the event as a result of filmed footage secured during the ride-along on _____, and broadcast on _____ on _____ a lawsuit, claim, action, or other proceeding is filed in which the California Highway Patrol, the State of California, and/or personnel thereof are named as party defendants or respondents.

ALL PARTICIPANTS

You are prohibited from taking photographs or making any type of recordings (e.g., video, audio) during a ride-along. Exceptions may only be made for members of the media and only with approval of the respective Area Commander. In addition, should you witness any type of incident (driving under the influence, citation, etc.), you may be subpoenaed to testify in court as a witness.

I hereby consent to receive/consent my minor child/ward to receive medical and hospital treatment that may be deemed advisable in the event of injury, accident, and/or illness during the ride-a-long.

PARTICIPANT'S NAME (LAST, FIRST, MIDDLE)

DATE

ADDRESS

TELEPHONE NUMBER

SIGNATURE (PARTICIPANT'S OR PARENT/LEGAL GUARDIAN)

DATE

EMERGENCY CONTACT

TELEPHONE NUMBER

SHIFT SUPERVISOR / CREW MEMBER SIGNATURE

DATE

CHP USE ONLY

CHP COMMENTS AND PLANNING DETAILS

EMPLOYEE ASSIGNED

DATE / SHIFT

DURATION

COMMANDER'S SIGNATURE

DATE