



DODGE COUNTY SHERIFF OFFICE

22 East 6th Street, Dept. 201
Mantorville, MN 55955-2255
Phone: 507-635-6200 FAX: 507-635-6225
Emergency 911

(Last Name) (First Name) (Middle Name) (Date of Birth)

(Address) (City) (State) (Zip Code)

(Driver's License or ID #) (Home Phone) (Work Phone)

(Parent's or Spouse's Name) (Phone #)

(Address) (City) (State) (Zip Code)

Date of Requested Ride Along Deputy Requested/Assigned

Approved _____
(Supervisor's Initials)

Not Approved _____
(Supervisor's Initials)

Waiver of Claims

I, _____ of _____
(Name) (Address)

In consideration of being permitted to ride in a Dodge County Patrol car, agree that Dodge County, its agents and Deputies, shall not be liable for any damage or injury that may be sustained by me while riding as a passenger in said Patrol car or cars, whether or not said damage or injury should be caused or be due in whole or in part by , due to, or contributed to, in whole or in part by, negligence of the County of Dodge, its agents, or employees.

Participant Agreement: I understand an abbreviated background check may be done, and I will:

1. Arrive at the agreed upon time, appropriately attired;
2. Obey all orders or requests related to my safety or protection made by any Deputy
3. Not interject myself into any situation without prior approval by a Deputy
4. Be exposed to situations, conversations and/or information considered confidential and protected under data privacy laws, and understand that anything witnessed and/or observed during my time with Dodge County may be classified as confidential information, and will adhere to data privacy laws.

Failure to comply with these instructions will result in termination of my participation and I will be returned to the Law Enforcement Center.

I affirm that I have read the above instructions and that by my signature; I agree to and will cooperate with all the instructions listed herein.

Participant's Signature

Parental Signature (if under the age of 18)

Witnessed by (Deputy or Supervisor)

Date/Time In: _____

Date/Time Out: _____