



*Longmeadow Police Department  
34 Williams Street  
Longmeadow, MA 01106  
413-567-3311*

RELEASE AND COVENANT NOT TO SUE

In consideration of permission which I have received to accompany one or more Police Officers of the Longmeadow Police Department of Longmeadow, Massachusetts, in the course of their duty, the undersigned, do, by these presents, release the Town of Longmeadow, its Police Officers, public officials, and employees from any and all liability, claims, demands, actions, causes of actions which I may hereafter have on account of any and all injuries and damage to me or to my property, on or account of my death, arising out of or related to any happening or occurrence while I am accompanying any Police Officer of the Longmeadow Police Department on duty, or incidental thereto, and for the same consideration, I release and covenant not to sue the said Town and the said persons, and agree to forever hold them and each of them harmless from any such liability, claims, demands, actions or causes of action. I am at least eighteen (18) years of age.

The terms hereof shall be in full force and effect on the date hereof and on any other occasion when I may hereafter accompany any Longmeadow Police Department Police Officer (s).

I have read and understand the conditions of this program and hereby voluntarily assume all risk of loss, damage or injury to me or my property, including death, which may be sustained while or incidental to accompanying one or more Longmeadow Police Officers while on duty.

This release and agreement shall be legally binding upon me and my heirs, executors, administrators, personal representatives and assigns, and shall inure to the benefit of the said Town, officers and agents, public officials and persons herein designated, and their heirs, executors, administrators, personal representatives, assigns and successors in office.



*Longmeadow Police Department  
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Longmeadow, MA 01106  
Ride-Along Program Signature Form*

PRINTED FULL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_

AVAILABLE DATE & TIMES \_\_\_\_\_

I have read the *Covenant Not to Sue-Promise to Release* on page 1, and by my signature below, I acknowledge that I understand and agree to the provisions as written.

\_\_\_\_\_  
Signature

DATE \_\_\_\_\_



**ADMINISTRATIVE USE ONLY**

BOP CHECK \_\_\_\_\_

III CHECK \_\_\_\_\_

LPD CHECK \_\_\_\_\_

SCHEDULED RIDE ALONG DATE, TIME, HOST OFFICER, SUPERVISORS'S INITIALS

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