

**COLORADO PARKS AND WILDLIFE
RIDE-ALONG PROGRAM
WAIVER AND RELEASE**

Name (Last, First, MI)	Date
Street Address	Phone number
City, State, Zip Code	Email address
Date of Birth (If participant is a minor, a parent or legal guardian must complete the Waiver and Release on behalf of the minor)	
Driver's License or State Issued ID number	State of Issuance
Emergency Contact (name, relation, phone number)	
Check Applicable Box Below: <input type="checkbox"/> Public <input type="checkbox"/> Legislative/Court/DA/AG Personnel <input type="checkbox"/> Law Enforcement Agency Personnel <input type="checkbox"/> Student <input type="checkbox"/> Media Member <input type="checkbox"/> Other: _____	
Why are you requesting to ride with a Colorado Parks and Wildlife employee?	
Who are you requesting to ride with (name of employee/ general position or specific location)?	

Due to the possible dangers, anyone choosing to participate in the Ride-Along Program must understand and assume the risks involved. All participants in the Ride-Along Program must complete a Waiver and Release. By filling out this form and submitting it to Colorado Parks and Wildlife you are 1) releasing liability, 2) waiving certain legal rights, 3) agreeing to certain legal obligations and 4) entering into a legally binding contract whether it is submitted electronically or by any other means. This Waiver and Release is intended to be a comprehensive release of liability, but is not intended to assert defenses, which are prohibited by law.

By completing and submitting this form and answering "YES" to the questions and statements set forth below, you are specifically acknowledging and assuming all the risks directly or indirectly involved with participation in the Ride-Along Program.

Applicant check “yes” or “no” for each statement below and sign before request can be processed.

I agree to abide by any and all instructions and expectations of the Colorado Parks and Wildlife personnel conducting the ride-along and agree that any failure to do so will result in the immediate termination of the ride-along.

YES NO

I acknowledge and understand that the ride-along may be terminated at any time for any reason by the Colorado Parks and Wildlife personnel conducting the ride-along or any Colorado Parks and Wildlife supervisor.

YES NO

I agree to non-disclosure of the identity of any contacted person unless such disclosure is specifically approved by the contacted person or Colorado Parks and Wildlife personnel conducting the ride-along.

YES NO

I acknowledge and understand that as a participant in the Ride-Along Program I may be subpoenaed as a witness in future civil or criminal law enforcement proceedings and acknowledge and understand the responsibilities and obligations associated with being a witness in such proceedings.

YES NO

I acknowledge and understand that some parts of the natural resources profession could be inherently dangerous. I may be subject to the risk of bodily injury, serious bodily injury or death, and other risks of damages or injury during the Ride-Along. I acknowledge and understand these risks and I knowingly and intentionally agree to assume these risks by my voluntary participation in the Ride-Along Program.

YES NO

I hereby knowingly and intentionally release the State of Colorado, the Department of Natural Resources, the Colorado Division of Parks and Wildlife, and its employees, agents, and officials, in their individual or official capacities from any and all liability in connection with my participation in the Ride-Along Program. I waive any and all claims, causes of action, liabilities, expenses (including reasonable attorneys' fees) or damages incurred while participating in the Ride-Along Program. I further agree that I will be responsible for any and all personal medical costs that may be incurred as a result of any injury sustained during my participation, including, but not limited to, injury resulting from the negligent acts or omissions of Colorado Parks and Wildlife personnel or from operation of any Colorado Parks and Wildlife conveyance, including, but not limited to, a motor vehicle, aircraft, vessel, off-highway vehicle or snowmobile, or in connection with any pursuit or apprehension of any person.

YES NO

I further agree not to sue the State of Colorado, the Department of Natural Resources, the Colorado Division of Parks and Wildlife, and its employees, agents, and officials, in their individual or official capacities for any and all claims, causes of action, liabilities, expenses (including reasonable attorneys' fees) or damages incurred while participating in the Ride-Along Program with Colorado Parks and Wildlife personnel or which in any way relates directly or indirectly to participation in the Ride-Along Program or this Waiver and Release

YES NO

I agree that I am entering into a legally binding contract and consent to enter into this Waiver and Release electronically. I further agree that any subsequent participation in the Ride-Along Program is evidence of the validity of the Waiver and Release.

YES NO

I HAVE CAREFULLY READ, CLEARLY UNDERSTAND AND VOLUNTARILY SIGN AND ENTER INTO THIS WAIVER, RELEASE AND AGREEMENT TO INDEMNIFY AND DEFEND AND HOLD HARMLESS BY ELECTRONICALLY TYPING OR SIGNING MY NAME AND DATE OF ENTRY IN THE SPACES PROVIDED BELOW.

Applicant's Signature Parent/Guardian's Signature (If Applicant is a minor) Date

All participants will be required to verify their identity at check-in prior to participation on the day of their scheduled ride-along by means of a secure and verifiable document (e.g. a driver's license) and acknowledge their previously executed Waiver and Release. All minor participants must be accompanied by the parent or legal guardian that executed the Waiver and Release when checking in to participate in the Ride-Along Program. The parent or legal guardian must also present a driver's license or state ID for identification purposes and acknowledge their previously executed Waiver and Release.

THIS SIDE FOR CPW USE ONLY

APPLICANT CRIMINAL HISTORY/BACKGROUND CHECK		
General	Wants/Warrants	Criminal History
<input type="checkbox"/> Driver's License (If applicable)	<input type="checkbox"/> NCIC	<input type="checkbox"/> QH NCIC
<input type="checkbox"/> Driver's License (If applicable)	<input type="checkbox"/> CCIC	<input type="checkbox"/> QH CCIC
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:

CPW Employee Conducting Background Check (Print Name) _____
 Date _____

- This ride-along for the purpose of enlisting support for Colorado Parks and Wildlife programs or to increase interest in natural resource issues is hereby **approved**. Approval is contingent upon the signing of this agreement by the citizen prior to participating in the Ride-Along Program.
- This ride-along is hereby **denied (comment below)**.

Supervisor's Signature _____ Date _____

Date of Ride-Along:	Start Time of Ride-Along:	Duration of Ride-Along:
Assigned to:		Cost Center:

Assigned Employee Comments (Completed after conducting ride-along):

Signature of Employee conducting the ride-along _____ Date _____