WHITMAN COUNTY SHERIFF'S OFFICE

P.O. BOX 470 COLFAX, WA 99111 PHONE (509) 397-6266 FAX (509) 397-2099

BRETT J. MYERS, SHERIFF

WHITMAN COUNTY SHERIFF'S OFFICE AGREEMENT ASSUMING RISK OF INJURY OR DAMAGE
WAIVER AND RELEASE OF CLAIMS
AND INDEMNITY AGREEMENT

WHEREAS, I _____ (☐ being / ☐ not being) over the age of eighteen and not being a member of the Whitman County Sheriff's Office, have made a voluntary request to ride as a guest in a vehicle assigned to the Whitman County Sheriff's Office and to accompany a member or members of the Sheriff's Office during the performance of their official duties, and

WHEREAS, the Whitman County Sheriff's Office is willing to allow me to ride as a guest in a vehicle assigned to their Office and to accompany a member or members of the Office during the performance of their duties on the following conditions:

NOW, THEREFORE, in consideration of the permission given to me to ride in a vehicle assigned to the Whitman County Sheriff's Office and to accompany a member or members of said Office during the performance of their official duties,

I do hereby agree:

1. That I am aware the work of the Whitman County Sheriff's Office is inherently dangerous and I may be subjected to the risk of death or personal injury or damage to my property by accompanying a member or members of the Sheriff's Office during the performance of their official duties and I freely, voluntarily, with such knowledge assume the risk of death, personal injury, or property damage arising from or in any way connected with the use of weapons, unlawful acts, or forcible resistance by law violators or suspected law violators, assault, riots, breach of the peace, fire, explosion, gas, electrocution, or escape of radioactive substances while accompanying a member or members of the Sheriff's Office during the performance of their official duties.

2. That the County of Whitman and Sheriff Brett J. Myers, his sureties, all members of the Whitman County Sheriff's Office, their sureties, and each of them, shall not be responsible or liable for any injury, damage, loss or expense, either to me or to my property incurred while riding in any vehicle assigned to the Whitman County Sheriff's Office or while accompanying any member or members of said Office during the performance of their official duties and resulting from any negligent act or omission on the part of any member of the Whitman County Sheriff's Office.

3. For myself, my heirs, executors, administrators, and assigns to defend and indemnify the County of Whitman, Sheriff Brett J. Myers, all members of the Whitman County Sheriff's Office, their sureties and each of them, against any and all manner of actions, causes of actions, suits, debts, claims, arising by reason of any actual or claimed negligent or wrongful act or omission of mine while riding in any vehicle assigned to the Whitman County Sheriff's Office or while accompanying any member or members of said Sheriff's Office during the performance of their official duties.

I hereby represent that I have carefully read and understand the contents of this document and sign of my own free will.

SIGNATURE:_____**DATE:**_____

WITNESS:_____**DATE:**_____

_____**DATE:**_____

SIGNATURE OF PARENT OR GUARDIAN IF APPLICANT IS A MINOR

NAME:_____PHONE:_____DOB:_____

ADDRESS:_____

APPROVED: ☐ _____to ride with_____

DATE OF RIDE ALONG:_____ NOT APPROVED ☐ _____