BALLWIN PUBLIC WORKS RIDE-ALONG APPLICATION

The Ride-Along Program of the Ballwin Public Works Department is designed to provide an opportunity for residents to become familiar with department operations, witness road conditions, and see crews active on the job.

Ballwin requires all participants be properly attired when riding in a City vehicle. Closed toed shoes and pants are required and sunglasses are recommended. City employees will provide other safety material as necessary including, but not limited to, reflective clothing, noise reduction ear plugs, and gloves.

Ride-Along participants become the responsibility of the employee with whom they ride. Participants are asked not to leave the vehicle unless their assistance is requested. This policy is necessary to protect the citizen from any eventuality of bodily harm, no matter how remote. The role participants play is strictly that of an observer.

| (PLEASE PRINT) | | | |
|--|------------------|------|---|
| Name: | | | |
| Age: Date Of Birth: | Home Phone: | | |
| Address: | | Zip: | |
| Reason for Request: | | | |
| (FOR OFFICE USE ONLY) | | | |
| This subject was notified, scheduled, and complete | ed ride along on | / | / |
| during the hours of | · | | |
| EMPLOYEE'S SIGNATURE: | | | |
| | | | |
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PERMIT, RELEASE, AND INDEMNIFICATION AGREEMENT

permission to ride in a Ballwin vehicle and of accompanying a Ballwin employee for the purpose of observing and becoming familiar with the operations of a Ballwin public works employee in the actual performance of his or her duties, do hereby release and discharge the City of Ballwin, the Ballwin Public Works Department, and all their employees, from all liability to me, my employer, my assigns, my heirs, my executors and personal representatives, now and forever, for all loss or damages, in any claim or demands, therefore, on account of injury or other casualty to myself or my property, whether by negligence or otherwise, during such time that I may be in an automobile or other vehicle of the City of Ballwin for the above mentioned purposes, while said employee is officially discharging his/her duties.

I further assume all risk of death, injury, loss or damage to my person or property, whether due to negligence or otherwise, and neither myself nor any of my representatives shall have any right or claim against the City of Ballwin, the Ballwin Public Works Department, their employees, in respect of or arising out of any such death, injury, loss or damage.

I further hereby agree to indemnify and save harmless the City of Ballwin, the Ballwin Public Works Department, and all of their employees on account of any debt, expense, claim liability or damage by reason of injury to me or damage to my property, whether by negligence or otherwise, while I may be in a Ballwin automobile or other vehicle or in the company of a Ballwin employee, while said employee is officially discharging his/her duties.

Signature of Applicant

Witness Signature (If under 21, parent or guardian must sign)

APPROVED: YES \Box NO \Box

Superintendent of Streets