



## Citizen Observer Application

Mark Available Times:  M T W Th F S Su  Morning Afternoon Night  Patrol Ride-Along  Chandler Heights Precinct (near Chandler Heights Rd & Lindsay Rd)  Desert Breeze Precinct (near Chandler Blvd & McClintock Dr)	Name (Last, First):					DOB:	
Phone Number: Email: City:	SSN:	_ Driver's License/ID :	#:			DL State:	
City:   Employer/School:   Occupation:   Occupation:   Occupation:   Please allow two weeks for processing. Applicants must live, work, or attend school in Chandler to be eligible   Chandler Resident   Employed in Chandler   Chandler Student   CPD Applicant (in current hiring process)	Race: Sex:	Height:'	_" Weight:_	lbs	Eye Color: _	Hair Color:	
Please allow two weeks for processing. Applicants must live, work, or attend school in Chandler to be eligible	Phone Number: () _	Email: _					
Please allow two weeks for processing. Applicants must live, work, or attend school in Chandler to be eligible   Chandler Resident	Home Address:	City:					
Chandler Resident	Employer/School:	Occupation:					
Mark Available Times:    M   T   W   Th   F   S   Su	□ c	handler Resident	☐ Emp	loyed in	Chandler	-	
Location Preference: Desert Breeze Precinct (near Chandler Blvd & McClintock Dr)  Ist, 2nd, and 3rd Choice Downtown Precinct (near Chandler Blvd & Arizona Ave)  Why are you interested in observing?  Notes:  Please print and return to a Chandler Police Precinct. Your signature (reverse side) must be witnessed by notary or Chandler Police personnel. Forms without a signature and witness signature will be rejected.  Completed by Chandler Police personnel  Checked by: Scheduled Date: Scheduled Time:  Badge #:	Requested Observation: Mark Available Times:	Morning Afternoon		•		☐ Park Ranger	
Please print and return to a Chandler Police Precinct. Your signature (reverse side) must be witnessed by notary or Chandler Police personnel. Forms without a signature and witness signature will be rejected.  Completed by Chandler Police personnel  Checked by: Scheduled Date: Scheduled Time:  Badge #:	Patrol Ride-Along Location Preference:  1st, 2nd, and 3rd Choice  Why are you interested in	☐ Desert Breeze Precinct (near Chandler Blvd & McClintock Dr) ☐ Downtown Precinct (near Chandler Blvd & Arizona Ave)					
Completed by Chandler Police personnel  Checked by: Scheduled Date: Scheduled Time:  Badge #:							
Checked by: Scheduled Date: Scheduled Time: Sergeant: Badge #:	•			_		_	
Sergeant: Badge #:		Completed by	Chandler	Police pe	ersonnel		
	Checked by:	Scheduled Date:			Scheduled Time:		
Observed with: Badge #:	Sergeant:			Ва	Badge #:		
	Observed with:			Badge #:			

## ASSUMPTION OF RISK, WAIVER OF LIABILITY, AGREEMENT NOT TO SUE, AND TO INDEMNIFY THE CITY OF CHANDLER

As a citizen observer with the Chandler Police Department, I understand that I am being allowed to participate solely for my own benefit and at the discretion of the Chandler Police Department. Participation in the citizen observer program begins when I arrive at the assigned location and concludes when I have left the ending location. In consideration of my being permitted to participate in the citizen observer program, I hereby agree to the following terms and conditions:

- 1. **Assumption of Risk.** I understand that as a citizen observer, I will be observing police actions in real time. I understand that police-related work is inherently dangerous and that I may be exposed to the same type and degree of risk faced by law enforcement officers or civilian police employees in the course of their duties.

  Due to the nature and setting of police related work:
- 2. Waiver of Liability/Hold Harmless Agreement. As a participant in the citizen observer program with the City of Chandler Police Department, I hereby agree to waive any and all liability that may be attributable to the City of Chandler, its elected officials, employees and agents, and to hold said persons or entities harmless against any and all actions, proceedings, alternative dispute resolution procedures, demands, claims, and causes of action, liabilities and other means of recovery of whatever nature, for injuries or damages to my person (including without limitation death, dismemberment, partial or permanent disfigurement or disability, or emotional distress), or to my property or business, including without limitation all forms of monetary recovery, whether for general, special, compensatory, or punitive damages, loss of earnings, loss of earning capacity, loss of profits or other damages of whatever nature), suffered during or resulting from or in any way related to my participation in this citizen observer program, whether caused by the negligence or grossly negligent conduct of City employees, police officers or employees or third parties. I further agree to apply this waiver of liability and hold harmless agreement to any right of action that might accrue to myself, my heirs, and my personal representatives.
- 3. **Indemnification**. I agree to indemnify, defend (with legal counsel selected by City) and hold the City of Chandler, its officials, employees and agents, harmless from and against any actions (whether legal, equitable or declaratory in nature), proceedings (whether in courts or administrative bodies), alternative dispute resolution procedures (whether arbitration, mediation, or otherwise) demands, claims and causes of action of whatever nature, costs and expenses (including attorney's fees), judgments, orders, decrees, liens and other encumbrances, liabilities, injuries to person (including without limitation, death, dismemberment, and emotional distress), damages (whether to person, property, or business, including without limitation, all forms of monetary recovery, whether for general, special, compensatory, or punitive damages, loss or earnings, loss of earning capacity, loss of profits or other damages of whatever nature), arising from or in any way related directly or indirectly to my own actions or inactions while participating in the citizen observer program.
- I may be exposed to conditions or situations that I find offensive to the senses or emotionally disturbing, including foul language, unpleasant odors, unsightly conditions, gruesome injuries, dead bodies, and physical confrontations involving police and members of the public, including physical fights involving hands, fists, batons, chemical agents, and weapons including conductive electrical weapons ("Taser"), knives and firearms where persons may be severely injured or even killed.
- I may be exposed to certain unavoidable risks and personal dangers that result in my suffering SERIOUS INJURY, AND IN SOME CASES DEATH, or property damage or loss, as a direct, indirect, negligent, or reckless actions of police officers, police employees or third parties. These risks and dangers to my person or property may arise from the risks of assaults or other criminal activities, the use or operation by police or third parties of motor vehicles, weapons including but not limited to firearms and knives, chemical agents, batons, conductive electrical weapons ("Taser"), dog bites, and exposure to blood or other bodily fluids, communicable diseases and sickness, or harmful substances, or other police or law enforcement equipment.
- Even if I abide by all rules and instructions given to me by the police department or police employee, I may still be exposed to the risks and dangers listed above.

Knowing these risks, I fully understand and assume any and all negligent, grossly negligent, or reckless dangers and risks to my safety and property and agree to abide by all rules, instructions, policies and procedures imposed by the City of Chandler Police Department relating to the conduct of civilian observers.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, I UNDERSTAND IT IS A PROMISE NOT TO SUE, AN ASSUMPTION OF RISKS, A RELEASE OF LIABILITY, AND AN AGREEMENT TO INDEMNIFY THE CITY FOR ALL CLAIMS AND OTHER MATTERS AS FURTHER SPECIFIED ABOVE RESULTING FROM MY OWN ACTIONS OR INACTIONS, AND I AGREE TO THE TERMS AND CONDITIONS AS SET FORTH HEREIN.

Date: \_\_\_\_\_\_ Signature (in witness's presence): \_\_\_\_\_\_ Signature: \_\_\_\_\_\_ Signature: \_\_\_\_\_\_ Signature: \_\_\_\_\_\_

Date: \_\_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_

**Underage (Police Cadet) Applicants:** I, the parent, guardian, or legal custodian of the minor, do hereby consent to the above waiver and agree to the terms stated above. (*Must be signed in witness's presence.*)