**Agreement Summary:**

The undersigned, parent/guardian of (Explorer name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a participant of the Walker County Sheriff’s Explorers Post #6400, hereby indemnifies and hold harmless the Walker County Sheriff’s Office, its agencies and employees, specifically including any and all Deputy Sheriffs or personnel involved with the supervision and control of the Walker County Sheriff’s Explorers Post #6400 from claims of any kind whatsoever or of any nature for injury to the person or damage to the property of (Explorer name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , his/her parents, siblings, or heirs. This indemnity and hold-harmless agreement shall be considered a complete and total waiver of any and all liability on the part of The Walker County Commission/The Walker County Sheriff’s Office, its servants, agents, or employees and particularly the Deputy Sheriffs engaged in the supervision and control as set forth herein above.

Explorer Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_

(Please print)

 Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (required)

(Please print)

Member signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (parent/guardian if explorer in not 18 years of age or older)

**Hold Harmless/ Indemnity Agreement:**

 Whereas the undersigned not being a member employee or agent of the Walker County Sheriff’s Office or Walker County, Alabama, has made a voluntary request for permission to ride as a guest or observer in a law enforcement vehicle at a time when such vehicle is operated and staffed by members of the Walker County Sheriff’s Office and has further requested permission to accompany a member or members of said law enforcement agency during the active performance of their official duties as Deputy Sheriffs.

 Now, therefore, in consideration of Walker County, a County Government, by and through its Sheriff’s Office, cooperating in making available to the undersigned the necessary personnel and the use of its vehicles and other facilities for the aforesaid purpose, the undersigned expressly agrees to and knowingly HEREBY DOES ASSUME ALL RISKS arising in the course of said activity, including, property damage or death, on behalf of myself, my heirs, executors, administrators, and assigns, and does hereby voluntarily release, discharge, waive and relinquish any and all claims and causes of action from personal injury, property damage or wrongful death against the Walker County Commission/Walker County Sheriff’s Office, its deputies, employees and agents, which may occur during my participation in the RIDE-AlONG. I understand that any aspect of police work can be a dangerous activity, and I agree to participate with knowledge of the damages.

 The undersigned specifically agrees to defend, indemnify and hold harmless the County, its deputies, agents and employees, from and against any and all claims, loss, damage and liability for injury to the undersigned person or property, including any such claim, loss, damage, and liability caused by the negligence of the County, its agents, deputies and employees, or acts of others. The undersigned also specifically agrees to indemnify and hold harmless the County, its deputies, agents and employees from and against any and all claims, loss damage and liability for injury to the person or property of another or others, directly or indirectly caused by the undersigned’s misfeasance or malfeasance occurring while riding as a guest or observer in any Walker County Sheriff’s Office vehicle or while accompanying a member of said agency during the active performance of his or her official duties as a peace officer.

Note: Persons riding with deputies of the Walker County Sheriff’s Office may be exposed to subjects that are intoxicated, angry, depressed, hurt, under the influence of narcotics, nude, victim of violence, victims of accidents, or other situations not commonly seen day to day. Riders and Parents of Juvenile riders should use discretion.

**READ THIS DOCUMENT COMPLETELY BEFORE SIGNING**

 I have read and voluntarily signed this “Release and Waiver of Liability and Indemnity Agreement” and acknowledge the significance of it. I agree that no oral representations, statements or inducements have been made to me which are not set forth in this Agreement. NOTE: THE SIGNATURE OF A PARENT OR GUARDIAN IS REQUIRED FOR THOSE EXPLORER CADETS UNDER THE AGE OF EIGHTEEN (18) YEARS.