

RINGGOLD POLICE DEPARTMENT

Daniel King, Chief of Police

150 Tennessee Street, Ringgold, Ga. 30736 Phone: (706) 935-3066 Fax: (706)935-7829



Citizen's Police Academy

Application for Participation

| Name Last: | First: | | Full | |
|--|-------------------|-------------|-------------------|----------------------|
| Address: | City | | State: | Zip |
| Date of Birth: | Social Secur | ity Numbe | er: | <u></u> |
| Driver's License Number: Employer: | | <u></u> | | |
| Cell Phone: | Wo | ork Phone | : | |
| | Bacl | kgroun | d | |
| Have you ever been arrested t | or anything other | er than a t | raffic offense? I | f yes, Explain below |
| | | | | |
| | | | | |
| | | | | |
| Are you a convicted felon? | Yes | No | | |
| Are you 21 or over? | Yes | No | | |
| Shirt size (Circle One) | S M L | XL X | XXL XXXL | |
| I hereby certify that the informal the best of my knowledge. The investigation of my personal in Police Academy. | e Ringgold Polic | e Departn | nent is authorize | ed to make any |
| Signed: | | | | |

Name-Based Criminal History Record Information (CHRI) Consent/Inquiry Form

| l hereby aι | uthorize _ | RINGGOLD POLICE DEPARTMENT | | to conduct an inquiry for | | | | |
|--|---|--|-------------------|--------------------------------------|-----------------------------------|--|--|--|
| 00 a | | Agency/Company | | | | | | |
| the purpos | se below a | and receive any G | eorgia and/or na | ational CHRI as aut | horized by state and federal law. | | | |
| Full Nam | e (print) | | | | | | | |
| | Address | | | | | | | |
| Sex | | Race | | Date of Birth | Social Security Number | | | |
| N/This and | | in realid for | 30 | days from da | to of signature | | | |
| K mis auti | 10112ation | is valid for | 30 | | | | | |
| □ I, | | uniu al biotomo bas | ماده داد با داده | , give conser for the duration of | nt to the above-named entity to | | | |
| perform p | eriodic cri | minai nistory bac | kgrouna checks | for the duration of | my employment. | | | |
| | | | | | | | | |
| Signature | | | | Date | | | | |
| | | 1/0 0 1 | 5 111011 | | | | | |
| Attorney fo | or Individi | ual (Purpose Cod | e E and U Only) | Bar Number | Date | | | |
| Date of Inc | auirve | Ti | me of Inquiry: | | Operator's Initials: | | | |
| Date of III | дин у | | ne or inquiry | | operator s mitiais. | | | |
| Purpose C | ode Used | | | | rmed per consent form. | | | |
| | | | ON-CRIMINAL JU | JSTICE PURPOSES | | | | |
| E | Employn | | | | | | | |
| M | | nployment direct care with Mentally III/Developmentally Disabled | | | | | | |
| N | | nployment direct care with Elderly | | | | | | |
| W | | ment direct care with Children | | | | | | |
| P | | ecord (no consent required) | | | | | | |
| F | Probate | robate Court/Weapons Carry License | | | | | | |
| | | | | DUAL OR THEIR AT | rtorney) | | | |
| U Personal Copy (stamp return "personal copy") | | | | | | | | |
| | 6: 11: | | | E EMPLOYMENT | N | | | |
| J | | n Criminal Justice Employment (state and III data received) | | | | | | |
| Z | Sworn Criminal Justice Employment (state and III data received) | | | | | | | |
| | | d in the followin | g (check all that | apply): | | | | |
| No | criminal h | istory available | | | | | | |
| Criminal history available (attached/released) | | | | | | | | |
| No | NCIC/GCI | C Warrant | | | | | | |
| Pos | Possible NCIC/GCIC Warrant (list Wanting agency below) | | | | | | | |
| Wanting Agency Name: | | | | | | | | |
| Wa | nting Age | ncy Telephone: | | 9 | | | | |



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Citizen's Police Academy

WAIVER, RELEASE AND INDEMNIFICATION

The Ringgold Police Department conducts a course known as the "Citizen's Police Academy", open to local citizens in which citizens are exposed to all major aspects of the operations of the Ringgold Police Department. The department conducts classes on and off the premises of the Ringgold Police Department, including particularly (but without limitation), class sessions at the Catoosa County Sheriff's Office. In consideration for the privilege and benefits to be derived from participating in the Citizen's Police Academy, the department is requiring all participants therein to execute this waiver, release and indemnification. Participation in the Citizen's Police Academy class sessions my involve physical activities such as, but not limited to, lifting, walking, riding, the discharge of firearms and will include risks such as falls, interaction with other participants, effects of weather, the physical conditions of the facilities and features and equipment located thereon, together with the inherent risks of being in close proximity to the discharge of firearms and the utilization of various items of equipment and other weaponry used by law enforcement personnel. Participant expressly assumes these and all other risks arising in any way out of Participant's participation in Citizen's Police Academy activities; including any transportation provided to, from and between such activities. Participant represents and warrants him/herself to be physically fit and able to participate in such activities, and agrees to stop and request assistance if experiencing any symptoms or other conditions which would make it difficult or unsafe to continue; further understanding that Participant is solely responsible for their own health and safety. Participant understands that at all Citizen's Police Academy class times, the privilege of their participation shall be governed by the Ringgold Police Department (inclusive of officers, officials, representatives and employees) and Participant will abide by and follow any directions given by the Ringgold Police Department Personnel. On behalf of Participant's self, heirs, executors and assigns, Participant does hereby waive and personally assumes any and all risks and liability for damages, losses, personal injuries or death which Participant might suffer, sustain or cause while participating in any activities of the Citizen's Police Academy and Participant does hereby release and forever discharge the Ringgold Police Department and City of Ringgold, all, officers, agents, employees representatives and other personnel (in their official and individual capacities), the County of Catoosa County, Georgia, (collectively, the "Releases") from any and all claims, demands, actions, damages, or suits at law or equity of whatever nature which Participant has or may hereafter acquire against the Releasee as a result of Participant's voluntary participation in the afore described activities, and Participant hereby holds harmless and agrees to indemnify Releases for all damages, attorneys fees and costs which may be incurred in defending any such demands, claims, actions and the like.

| withesses: (two witnesses, please) Signature: | Printed Name Signature Printed Name Signature |
|---|---|
| YOUR SIGNATURE: | |
| Signature: | |
| Printed Name: | |
| Address: | |