



HUDSON POLICE DEPARTMENT

APPLICATION FOR CITIZENS POLICE ACADEMY

Participants Information

Name: _____
Last First Middle

Social Security Number: _____ Date of Birth: _____

Current Address: _____

City/State/Zip Code: _____

Cell Phone: _____ Permanent Phone: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Emergency Contact Address: _____

How did you hear about this program? _____

What are your areas of interest?

I am interested in the following areas:

(1)

(2)

You will need to respond to Hudson Police Department once accepted for a fingerprint check. The Confidentiality Agreement and Waiver Forms (below) may be notarized at HPD at the same time

Submit/mail applications to:
Hudson Police Department/ Support Services Division
1 Constitution Drive
Hudson, NH 03051



CONFIDENTIALITY AGREEMENT

Whereas, The Hudson Police Department wishes to provide law enforcement training to private citizens,

Therefore, during the course of such training the recipients will have access to documents and information declared by law to be confidential, including, without limitation, criminal investigation reports, photographs, fingerprint cards, criminal records, and the Bureau of Emergency Communications (911), and

Therefore, The Town of Hudson may become legally liable for the release of confidential documents and information, and

Therefore, The Town of Hudson wishes to obtain assurance that private citizens participating in the programs will not release confidential information without authorization.

NOW, THEREFORE, in consideration of the law enforcement training which the Hudson Police Department will provide, the undersigned recipient of such training agrees to indemnify the Town of Hudson and its employees for any judgment or settlement of a claim based upon the unauthorized release or dissemination of confidential documents or information by the undersigned.

Participants Name (print): _____ **Date:** _____

Participants Signature: _____

SWORN TO BEFORE ME THE _____ DAY OF _____, 20____

JUSTICE OF THE PEACE / NOTARY PUBLIC

MY COMMISSION EXPIRES



HUDSON POLICE DEPARTMENT
CITIZENS POLICE ACADEMY
 CONVENANT NOT TO SUE, RELEASE
 AND INDEMNIFICATION AGREEMENT

I, _____, residing at _____,
 Town of _____, County of _____ State of _____,
 For myself and for my heirs, legal representatives, and assigns, in consideration of the permission granted to me by the Town of Hudson, New Hampshire, acting through its Police Department, to participate in the Police Department's Citizen Police Academy Program including, but not limited to riding in a patrol vehicle with a sworn officer, use of department firearms, scenario based motor vehicle stops, while on trips to any off-site location, during any class participation, and while on the police department property, covenant with the Town of Hudson, New Hampshire, its departments, officers, officials, employees, and legal representatives, to never institute any suit or action of law or equity against the Town of Hudson, New Hampshire, its departments, officers, officials, employees, and legal representatives, by reason of any claim I now have or may hereafter acquire relating to any present or future accidents or injuries occurring to me as a result of my participation in the Citizen Police Academy Program.

I hereby expressly release for myself and for my heirs, legal representatives, and assigns, and agree to save, defend, indemnify, and hold harmless the Town of Hudson, New Hampshire, its departments, officers, officials, employees, agents and legal representatives, from any and all claims, demands, suits, loss, cost or expenses, actions, judgments, and against the Town of Hudson, New Hampshire, its departments, officers, officials, employees, agents, and legal representatives, by reason of any damage to property or personal injury, including death, sustained by myself or any person whatsoever, which arises out of or is incidental to or in any way connected to my participation in the Citizen Police Academy Program, regardless of whether such claim, demand, suit, loss, cost, or expenses, action, judgment, or execution is caused in whole or in part by any negligent act or omission of the Town of Hudson, New Hampshire or its departments, officers, officials, employees, agents, and legal representatives.

I hereby understand that the dissemination of any information, written or verbal, I may see or hear during my participation in the Citizen Police Academy Program is a violation of State and Federal Laws.

 APPLICANT SIGNATURE

 DATE

IN WITNESS WHEREOF, I, _____, HAVE EXECUTED THIS
 RELEASE AND COVENANT NOT TO SUE THE Town of Hudson, New Hampshire, this
 _____ day of _____ 2018

 WITNESS SIGNATURE

 DATE



HUDSON POLICE DEPARTMENT
RIDE ALONG-PROGRAM
 CONVENANT NOT TO SUE, RELEASE
 AND INDEMNIFICATION AGREEMENT

I, _____, residing at _____,
 Town of _____, County of _____ State of _____,
 For myself and for my heirs, legal representatives, and assigns, in consideration of the permission granted to me by the Town of Hudson, New Hampshire, acting through its Police Department, to participate in the Police Department's Ride-Along Program including, but not limited to riding in a patrol vehicle with a sworn officer, covenant wit the Town of Hudson, New Hampshire, its departments, officers, officials, employees, and legal representatives, to never institute any suit or action of law or equity against the Town of Hudson, New Hampshire, its departments, officers, officials, employees, and legal representatives, by reason of any claim I now have or may hereafter acquire relating to any present or future accidents or injuries occurring to me as a result of my participation in the Ride-Along Program.

I hereby expressly release for myself and for my heirs, legal representatives, and assigns, and agree to save, defend, indemnify, and hold harmless the Town of Hudson, New Hampshire, its departments, officers, officials, employees, agents and legal representatives, from any and all claims, demands, suits, loss, cost or expenses, actions, judgments, and against the Town of Hudson, New Hampshire, its departments, officers, officials, employees, agents, and legal representatives, by reason of any damage to property or personal injury, including death, sustained by myself or any person whatsoever, which arises out of or is incidental to or in any way connected to my participation in the Ride-Along Program, regardless of whether such claim, demand, suit, loss, cost, or expenses, action, judgment, or execution is caused in whole or in part by any negligent act or omission of the Town of Hudson, New Hampshire or its departments, officers, officials, employees, agents, and legal representatives.

I hereby understand that the dissemination of any information, written or verbal, I may see or hear during my participation in the Ride-Along Program is a violation of State and Federal Laws.

 APPLICANT SIGNATURE

 DATE

IN WITNESS WHEREOF, I, _____, HAVE EXECUTED THIS
 RELEASE AND COVENANT NOT TO SUE THE Town of Hudson, New Hampshire, this
 _____ day of _____ 2018.

 WITNESS SIGNATURE

 DATE



HUDSON POLICE DEPARTMENT

RIDE-ALONG PROGRAM

The Hudson Police Department welcomes Hudson Citizens, Hudson Businesses, and Criminal Justice Majors who would like to join their Ride-Along Program. Of course, as with any similar program, there are necessary regulations as shown below:

- Applicants must be 18 years of age.
- A minimum of 3 working days advance notice is required to allow application processing and scheduling **prior to the requested ride-along date.**
- Participation is limited to (4) hour sessions between the hours of 11:00 a.m. and 11:00 p.m. Sessions are allowed seven days a week.
- Participation is limited to one ride-along in a sixty (60) day period.
- The applicant is required to sign the liability release and covenant agreement on the date of reporting to ride. Here is a sample of that form.
- Applicant must provide photo identification (i.e. drivers license or other acceptable photo ID).
- Only one citizen participant can be permitted to ride during a given four-hour session.
- Dress/attire can be casual. Dress should be conservative and reflect good taste.

You must apply in person at the Hudson Police Department. Please note: A background check is necessary before you can participate.