



HUDSON POLICE DEPARTMENT APPLICATION FOR CITIZENS POLICE ACADEMY

Participants Information		
Name:Last	First	Middle
Last	FIISt	Middle
Social Security Number:	Date o	of Birth:
Current Address:		
City/State/Zip Code:		
Cell Phone:1	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
HISTIGE OF THE BEACE / NOTABY BUDLIC	MV	COMMISSION	CVDIDEC



WITNESS SIGNATURE



HUDSON POLICE DEPARTMENT <u>CITIZENS POLICE ACADEMY</u> CONVENANT NOT TO SUE, RELEASE AND INDEMNIFICATION AGREEMENT

I,	, residing at	,
Town of	, residing at , County of	State of,
For myself and permission grade Department, to including, but firearms, scenarios participa Hudson, New representative New Hampshi reason of any	d for my heirs, legal representatives, anted to me by the Town of Hudson, to participate in the Police Department not limited to riding in a patrol vehicle ario based motor vehicle stops, while tion, and while on the police department Hampshire, its departments, officers, s, to never institute any suit or action are, its departments, officers, officials claim I now have or may hereafter action in the police occurring to me as a result of the police of the poli	and assigns, in consideration of the New Hampshire, acting through its Police t's Citizen Police Academy Program ele with a sworn officer, use of department on trips to any off-site location, during any nent property, covenant with the Town of
agree to save, departments, or claims, deman Hudson, New representative sustained by n way connected whether such or caused in who Hampshire or	defend, indemnify, and hold harmles officers, officials, employees, agents and some suits, loss, cost or expenses, action Hampshire, its departments, officers, some system of any damage to proper myself or any person whatsoever, whild to my participation in the Citizen Policials, demand, suit, loss, cost, or expelle or in part by any negligent act or of its departments, officers, officials, enterstand that the dissemination of any integration in the Citizen Police Assertions.	eirs, legal representatives, and assigns, and is the Town of Hudson, New Hampshire, its and legal representatives, from any and all ons, judgments, and against the Town of a officials, employees, agents, and legal try or personal injury, including death, inch arises out of or is incidental to or in any police Academy Program, regardless of benses, action, judgment, or execution is omission of the Town of Hudson, New imployees, agents, and legal representatives. Information, written or verbal, I may see or Academy Program is a violation of State and
APPLICANT SIGNA	ATURE	DATE
RELEASE AN	WHEREOF, I,	, HAVE EXECUTED THIS E Town of Hudson, New Hampshire, this

DATE





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

I,	, residing at		;
Town of	, residing at , County of	State	e of,
For myself and for a permission granted bepartment, to partilimited to riding in a New Hampshire, its never institute any sits departments, offinow have or may be occurring to me as a	my heirs, legal representation me by the Town of Hudicipate in the Police Depart a patrol vehicle with a swo departments, officers, off suit or action of law or equivalents.	ives, and assigns, in condson, New Hampshire, actment's Ride-Along Proorn officer, covenant wit icials, employees, and leadity against the Town of and legal representative any present or future act in the Ride-Along Program.	sideration of the cting through its Police ogram including, but not the Town of Hudson, egal representatives, to Hudson, New Hampshire, es, by reason of any claim Incidents or injuries gram.
departments, officer claims, demands, su Hudson, New Hamp representatives, by a sustained by myself way connected to m demand, suit, loss, of by any negligent act		gents and legal represents actions, judgments, and ficers, officials, employer operty or personal injury, which arises out of or E-Along Program, regard udgment, or execution is of Hudson, New Hamps	atives, from any and all against the Town of ses, agents, and legal ry, including death, is incidental to or in any alless of whether such claims caused in whole or in part
	that the dissemination of icipation in the Ride-Alon		or verbal, I may see or of State and Federal Laws
APPLICANT SIGNATURE		DATE	_
RELEASE AND CO	EREOF, I, OVENANT NOT TO SUE 2022.		
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.