

OFFICE OF Sheriff of Vanderburgh County Headquarters

Noah Robinson Sheriff Nathan Sugarman Chief Deputy

_____ Xray: __

Facility Tour Request Form

GROUP INFORMATION

Name of Group:		Number of Participants:					
Address:	City:	State:	Zip:				
Tour Organizer:		Phone:					
Tour Prerequisites The Vanderburgh County Sheriff's Office offers tours of its facilities on a limited basis as an effort to show an understanding of how the Sheriff's Office functions as a Law Enforcement Agency. It is an important tool to affect good relations and education between the community and the Sheriff's Office. The following are required prior to participating in a tour of any of our facilities: • The minimum age to tour the facility is twelve (12) years of age or older. This age would include middle school grades 6 th , 7 th , and 8 th . Any deviations shall be approved by a member of the Executive Team • Twenty (20) participants excluding chaperones is an optimal number and size of the group. • The Sheriff's Office requests a minimum of two weeks notice when requesting a tour in one of their facilities. • No tours shall be scheduled Monday thru Friday before 9:00 a.m. • Those attending the tour will have no communication with inmates or participants. • The confinement center reserves the right to request names and identifiers of persons expected on a tour in advance for security reasons and may refuse their entry with just cause. • Persons on parole or probation or currently in any other court mandated program must notify the Jail staff of such and may be denied admittance. • All persons participating in the tour must pass through the metal detector successfully. • No cameras cell phones or any type of weapon will be allowed in the secured part of the Confinement Center. • All persons shall wear proper attire while in the confinement center. • In the event of an emergency or at the discretion of the on duty supervisor the tour can be stopped at any point during the tour. • Any participant under the age of eighteen (18) must have signed permission from a legal parent or guardian to attend the tour.							
Administration Information (To be filled out by Sheriff's Office Personnel)							
Location of Tour: 🗆 Confinement Center	er Court Security	Date/Time:					
Authorized by:		Xray: D	ate:				
Signed Waiver Provided: Yes	☐ No Number of F	Participants (including chapero	ones):				

Tour conducted by:

Waiver and Release Agreement and Informed Consent For Vanderburgh County/Vanderburgh County Sheriff's Office Facility Tour Request

The undersigned, in consideration for acceptance, approval and participation in a Facility Tour (the "Tour") provided by Vanderburgh County (the "County") and the Vanderburgh County Sheriff's Office (the "Sheriff's Office") does hereby agree to this waiver and release agreement.

I recognize that the TOUR may carry a risk of personal injury and may cause physical and/or emotional discomfort. I further recognize that there are natural and manmade hazards, environmental conditions, diseases and other risks, which in combination with my actions in the TOUR can cause injury to me. I hereby agree to assume all risks which may be associated with or which may result from my participation in the TOUR. I state that I am free from any known health conditions that could prevent me from participating in any of the activities associated with the TOUR. I further state that I am sufficiently physically fit to participate in the activities of this request.

I further agree to release, indemnify and hold harmless the County and the Sheriff's Office, their agencies, departments, officers, employees, agents, representatives, affiliates, directors, servants, volunteers, members, sponsors and/or officials and staff from any such entity or person, their representatives, agents, affiliates, directors, servants, volunteers and employees from the costs of any medical care that I receive while participating in the TOUR or as a result of it.

I further agree to release, indemnify and hold harmless the County and the Sheriff's Office, their agencies, departments, officers, employees, agents, representatives, affiliates, directors, servants, volunteers, members, sponsors and/or officials and staff from any and all liability, claims, demands, actions and causes of actions whatsoever for any loss, claim, damage, injury, illness, attorneys fees or harm of any kind or nature to me arising out any and all activities associated with my participation in the TOUR.

I further agree to release, indemnify and hold harmless the above-mentioned entities and representative officials from all liability, negligence or breach of warranty associated with injuries or damages from any claim by me, my family, estate, heirs or assigns from or assigns from or in any way connected with my activities in the TOUR.

I further agree to release, indemnify and hold harmless the above-mentioned entities and representative persons from all liability, negligence or breach of warranty associated with injuries or damages caused by my participation in the TOUR to any third party(jes).

Consent is expressly given, in the event of injury, for any emergency medical treatment, including, but not limited to, anesthesia and/or operation, if, in the opinion of the attending physician, such treatment is necessary.

I HAVE CAREFULLY READ AND UNDERSTAND THE CONTENTS OF THE AGREEMENT AND STATE THAT THE CONTENTS OF THIS AGREEMENT HAVE BEEN FULLY EXPLAINED TO ME. I DO HEREBY CERTIFY, STATE AND ACKNOWLEDGE THAT I AM NOT UNDER THE INFLUENCE OF ALCOHOL OR ANY MIND-ALTERING SUBSTANCE WHATSOEVER, FREE OF ANY DURESS OR COERCION AND VOLUNTARILY, KNOWINGLY AND WILLINGLY EXECUTE THE AGREEMENT INTENDING IT TO COVER MY PARTICIPATION IN THE TOUR SPONSORED BY THE COUNTY AND THE SHERIFF'S OFFICE.

Group Name:		Organizer: P		Phone:	
Participant	Age	Signature (if minor guardian)		Date	