



CONSOLIDATED FIRE DISTRICT 2

CITIZEN'S RIDE-ALONG APPLICATION



Purpose: Interested citizens may, at the Consolidated Fire District No. 2's discretion; Ride-Along to see how the Consolidated Fire District No. 2's employees their duties and experience the components of the FIRE/EMS systems operating in Northeast Johnson County, Kansas.

Definitions: Any individual who takes part in the Ride-Along Program will be known as an "Observer." The Consolidated Fire District No. 2 shall also be known as CFD2 in this document.

Limitations:

- A. **All participants must be at least 16 years of age.**
- B. **All participants must make application for and be accepted to the Ride-Along Program.**
- C. **All participants must read and sign a "RELEASE OF LIABILITY" form. If the Observer is less than 18 years of age, this form must also be signed by a Parent or Legal Guardian.**
- D. **The "Observer" is to act in the role of observation only, and may at any time be restricted from the scene by the Officer or Incident Commander, whenever deemed necessary.**
- E. **The Observer may not Ride-Along after 2200 hours (10:00 p.m.) without special permission from the on-duty Battalion Chief.**

Requirements:

The Citizen's Ride-Along forms shall be submitted to the CFD2's administrative assistant by the observer candidate prior to riding. The application shall include the name, address, city, state, email and phone number of the observer candidate. If approved, the Battalion Chief may contact the observer and establish an observation date and time, if applicable. Individuals who are under the age of eighteen (18) are permitted to ride only when associated with a school careers class, an outreach program, or as an Explorer Scout registered with the Boy Scouts of America (this program is co-educational).

- ✓ Observers 18 years or older must sign a **Release of Liability Form**. Observers under the age of 18 must have the consent of their parent or legal guardian as evidenced by their signature on the **Release of Liability Form**.
- ✓ The **Release of Liability Form** and the **Observer's Application** shall be submitted to the administrative assistant. Existing staffing patterns will be an element in determining when and where an observer will be assigned.
- ✓ Proper attire is required. Dark dress or uniform pants, a solid colored shirt, and black or brown leather footwear are preferred. Torn blue jeans or an unconventional appearance will not be allowed.

CFD2 CITIZEN'S RIDE-ALONG APPLICATION

Please print clearly.

NAME _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____ EMAIL _____

EMERGENCY CONTACT INFORMATION

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME PHONE _____ CELL PHONE _____

1. Have you ever ridden with CFD2 in the past? _____ If yes, which unit and shift? _____

What is the purpose of riding with CFD2 (e.g., to fulfill a high school requirement, to explore a career in the Fire Service, etc.)

3. What are your expectations from the ride-along with CFD2 crews?

4. Specify the date and time you would like to ride. _____

5. Please specify two alternate dates and times. _____

Signature: _____

Date: _____

Release and Waiver of Liability

IMPORTANT: Please read carefully before signing.

I request permission to ride as an Observer with the Consolidated Fire District No. 2 (CFD2), in an assigned fire apparatus. I agree to follow all instructions, directives, and orders from CFD2 personnel while participating as an Observer.

I am qualified, in good health, and in proper physical condition to participate in the Ride-Along Program. I willingly agree to comply with the stated and customary terms and conditions of participation. I have been fully advised of my position within said vehicle and understand the risks associated with participating in this Ride-Along Program. I fully accept and assume all risks and assume all responsibilities for any losses or damages I incur as a result of my participation in the Ride-Along Program.

In consideration for riding as an Observer with CFD2, I hereby voluntarily and knowingly release and discharge the County of Johnson - including its officers and employees, servants and agents, including the Fire Board - and CFD2 - including its officers, employees, servants, and agents - from any claim, loss or damages I incur that arise out of or in connection with participating in the Ride-Along Program. I understand, acknowledge, and accept that this Release and Waiver of Liability is intended to be binding on me, including my family, estate, heirs, executors, administration, and assigns.

I understand, acknowledge, and accept the possibility that I or my successors may not now fully know the number or magnitude of all the released claims, losses, or damages but nevertheless assume the risks by releasing such unknown claims, and agree that this Release and Waiver of Liability is a full and final release and waiver of all claims.

Observer's Name
(print)

Observer's
Signature

Parent or Legal Guardian
(print)

Parent or Legal Guardian
Signature

CFD2 Witness
(print)

CFD2 Witness
Signature

* Please forward this form to the Administrative Assistant.

Upon receipt of completed forms from the Observer, a copy of the Observer's Application, an Observer's Evaluation and an Officer's Evaluation Form will be sent out to the Battalion Chief who is scheduled to be on duty on the first requested ride along date. The BC will contact the Observer to schedule the ride along.