

Appendix A



Student Ride-Along Application

Applicant Information			
<i>The completed application must be returned to the fire and rescue administrative office at least seven business days prior to your first requested Ride-Along date. Any false information or omissions on this application may result in disqualification for Ride-Along privileges. The department reserves the right to deny Ride-Along privileges for any reason, without prior notice.</i>			
Full Name		Date of Birth	
Home Address		Primary Contact Number	
Emergency Contact Name		Emergency Contact Number	
Place of Employment or School/Program		Gender (check) Male <input type="checkbox"/> Female <input type="checkbox"/>	
Position/Title	Major/Course		
Place of Employment/School Address		Employer/School Phone	
Agency Representing			
Date(s) you are requesting to Ride-Along?		Time period you wish to Ride-Along?	
<i>Please answer the following by placing a 'Y' for yes or an 'N' for no, in the box to the right of the question.</i>			
Are you subject to a court order restraining you from harassing, stalking, or threatening an intimate partner or child of such a partner?		Are you under indictment or do you have charges pending in any court for any crime?	
Are you currently taking any medications that could impair your judgment?		Have you ever participated in the Ride-Along program before? If yes, when did you last participate?	
I have read and understand the procedure for the Student Ride-Along program of the Winchester Fire and Rescue Department. The above information is true and accurate to the best of my knowledge.			
Signature of Applicant: _____		Printed Name: _____	
Signature of Guardian: _____		Printed Name: _____	
FOR DEPARTMENT USE ONLY			
Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No		Return completed form to:	
Signature: _____		Winchester Fire and Rescue Department 21 South Kent Street, Suite 301 Winchester, VA 22601	
Printed Name: _____		If you have any questions contact 540-662-2298	
Comments: _____			

Appendix B



Ride-Along Participation Notice of Privacy Laws, Release of All Claims and Assumption of the Risk Agreement.

I, _____, not being a member of the City of Winchester, Winchester Fire and Rescue Department, have made a voluntary request to ride as a guest student/observer in a vehicle assigned to the Winchester Fire and Rescue Department (WFRD) and to accompany members of the WFRD during the performance of their official duties (“Ride Along”).

For good and valuable consideration, the sufficiency and receipt of which is hereby acknowledged, I do hereby, for myself, my spouse, heirs, executor, or administrator, and personal representatives, agree to the following terms and conditions.

1. I have fully read and understand the Application and this Policy. I agree to all the rules and requirements in the Application and this Policy.

2. Assumption of the Risk

I am aware that the work of the WFRD is inherently dangerous, that the WFRD is not the insurer of my safety, and that I may be subjected to the risk of death, personal injury, or damage to my property by accompanying members of the WFRD during the performance of their official duties. I understand, accept, and assume all of the risks associated with the Ride Along, including but not limited to: death, personal injury, or property damage arising from or in any way connected with response to emergency incidents by the use of weapons, unlawful acts, running, fighting, throwing objects, fire, explosives, gas, electrocution, garbage, debris, human waste, bodily fluids, or the escape of hazardous substances, including, without limitation, being shot, stabbed, assaulted, hit, punched, kicked, scratched, spit on, burned, cut, slipping and falling, or sustaining an injury in any other way from these risks while accompanying members of the WFRD during the performance of their official duties. I understand, accept, and assume all of the risks inherent in riding in a **fire and rescue** vehicle, including, without limitation, of bodily injury from a crash. I freely, voluntarily, and with the knowledge of the contents of the Application and this policy assume all risks associated with the Ride Along Program, including but not limited to death, personal injury, or property damage arising from or connected with participation in the Ride Along Program, either with or without the supervision of a member or members of the WFRD. For myself, my heirs, personal representatives, executors, administrators, and assigns, I acknowledge, assume, and accept these inherent risks and assume and accept the risk of my decision to participate in the Ride Along Program.

3. Release
For myself, my heirs, personal representatives, executors, administrators and assigns, I hereby release and covenant not to sue the City of Winchester, **volunteer stations and/or** its public officials, representatives, officers, employees, agents, and their sureties, including without limitation all members of the WFRD personally and their sureties, and release each of them from and waive any and all liability, claims, demands, or actions or causes of action whatsoever, present or future, whether the same be known, anticipated, or unanticipated, resulting from or arising out of any damage, loss, or injury to me or my property incurred during my participation in the Ride Along Program, or while riding in any vehicle assigned to the WFRD, or while accompanying members of the WFRD during the performance of their official duties, or while on the premises of the City or **volunteer stations**, regardless of the cause.
4. Indemnification
For myself, my heirs, personal representatives, executors, administrators and assigns, I agree to defend, indemnify, and hold harmless the City of Winchester, **WFRD volunteers**, its public officials, representatives, employees, agents, and sureties, including without limitation any and all members of the WFRD personally and their sureties, and each of them, against any and all manner of actions, causes of action, suits, debtors, claims, demands, damages, liability, costs, or expenses of every kind and nature incurred or arising out of any act or conduct, including, without limitation, actual or claimed negligent or wrongful acts or omissions, by me or by the City, including, without limitation, any employee or member of the WFRD, while riding in any vehicle assigned to the WFRD, or while accompanying any member of WFRD during the performance of their official duties, or while on or at any or all of the premises of the City and the WFRD and places during the Ride Along Program.
5. Voluntary
I agree to participate in the Ride Along Program freely and voluntarily. The WFRD has not induced me to participate in the Ride Along Program, and I am not relying on any representations of any member of the WFRD as to my safety, supervision, or support during the Ride Along.
6. Attorney's Fees
For myself, my heirs, personal representatives, executors, administrators and assigns, I agree to defend and to pay any and all attorney's fees as a result of any action brought by or against the City of Winchester, its volunteers, employees, or agents, for any acts or conduct on my part of whatever kind or nature whatsoever, while in, on, or about any WFRD vehicles, or at any or all of the premises or places during the Ride Along, or while accompanying any member of WFRD during the Ride Along.
7. This Agreement shall be valid and cover all participation in the Ride Along Program for one (1) year from the date below. Any participation after the one-year expiration date shall require the execution of another Agreement.

I HEREBY REPRESENT THAT I HAVE CAREFULLY READ AND UNDERSTAND THE CONTENT OF THESE DOCUMENTS AND SIGN THE SAME OF MY OWN FREE WILL.

CAUTION: READ THIS DOCUMENT IN FULL BEFORE SIGNING

Date: _____ **Signature:** _____

Parent/Guardian Signature: _____

Address: _____

Phone # _____