



**RIDE-ALONG OBSERVER PROGRAM RELEASE**

In consideration of my receiving permission from the Prince George's County Fire/EMS Department to enter upon the premises of any fire station or related entity, any other premises owned and/or operated and/or used by any fire station within Prince George's County, and in further consideration of receiving permission from said Fire/EMS Department to participate in a Ride-Along Observer Program, wherein I will be riding in, on, or upon Fire/EMS Department vehicles or using other apparatus, the undersigned hereby releases the Prince George's County Fire/EMS Department, Prince George's County Police Department, and any and all agents, officers, servants, employees, attorneys, or other representatives of the foregoing from any and all liability, claims, demands, actions and causes of actions, whatsoever, arising out of or related to any loss, property damage, physical injury, contagious disease, or death that may be sustained by me while in, on, or upon any premises, vehicles, or apparatus owned, occupied, or used by the foregoing, or which may be sustained by me while at the scene of any real or apparent emergency situation requiring a response of the Prince George's County Fire/EMS Department, or while commuting to and from the fire station(s) and other points.

I hereby certify that I am duly aware of the risks and hazards, including serious physical injury or death, inherent upon participating in the Ride-Along Observer Program, that such risks and hazards may exist even in non-emergency situations, and being duly aware of such risks and hazards, I hereby elect, voluntarily, to participate in the Ride-Along Observer Program. I hereby assume all risks of loss, damage, and/or injury, including death that may be sustained by me or by any of my property while participating in the Ride-Along Observer Program.

This release shall be binding upon my relatives, spouse, heirs, distributees, next of kin, executors, administrators, and any other interested parties.

In signing this release, I hereby acknowledge and represent:

1. I have read the rules and regulations outlined in General Order 1-3, Ride-Along Observer Program.
2. I have read the release, understand it, and signed it voluntarily.
3. I am over eighteen (18) years of age and I am of sound mind and of sound physical health.
4. I am not an agent, servant, or other employee of the Prince George's County Fire/EMS Department.
5. Any injuries or other damage suffered by me will not be compensable by Worker's Compensation or any other insurance program maintained by the Prince George's County Fire/EMS Department.



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I also agree to adhere to the following guidelines:

1. I will abide by any and all applicable rules and regulations of the Fire/EMS Department.
2. I will not ride or attempt to ride or use or attempt to use, any vehicle or apparatus utilized within the Prince George's County Fire/EMS Department until such time as a duly authorized officer has reviewed with me the procedures for riding or using same.
3. I also agree that I have no physical or mental handicaps that may affect me during my participation in this program or which may be aggravated by my participation in this program, except for the following:

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Despite the Fire/EMS Department's knowledge of this disability or defect, I agree that their continuing grant of permission for me to participate in this program shall not subject them to any liability.

4. I also authorize and instruct the Prince George's County Fire/EMS Department or their authorized representatives to notify the following person in case of any accident in which I am involved while participating in this program or while I am commuting to and from the fire station(s) or other points.

\_\_\_\_\_  
Name & Relationship

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Number(s)



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5. Have you been denied membership or career status in the Prince George's County Fire/EMS Department for criminal record, background investigation, or medical reasons? Yes \_\_\_\_ No \_\_\_\_

If so, explain \_\_\_\_\_  
\_\_\_\_\_

6. Do you have any pending criminal charges against you? Yes \_\_\_\_ No \_\_\_\_

If so, explain \_\_\_\_\_  
\_\_\_\_\_

7. Do you have any Felony convictions? Yes \_\_\_\_ No \_\_\_\_

If so, explain \_\_\_\_\_  
\_\_\_\_\_

8. If you have been denied membership in another fire/rescue organization outside of Prince George's County, said reason(s) is to be disclosed to the Prince George's County Fire/EMS Department.

\_\_\_\_\_  
\_\_\_\_\_

9. Should I be a bona fide member of a fire/rescue association or department, I will disclose the name of such organization:

\_\_\_\_\_  
Name of Organization

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
President/Chief Officer



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- 10. Upon request, a medical waiver statement from a physician shall be submitted to substantiate fitness to perform in a ride-along observer status on-the-scene of emergency operations.

This release form shall become a permanent record of the Prince George's County Fire/EMS Department.

Expected "Ride-Along Observer" dates and station:

\_\_\_\_\_ to \_\_\_\_\_ **Station** \_\_\_\_\_

At the end of this period, a new release form shall be obtained.

\_\_\_\_\_  
Signature Printed Name of Participant

\_\_\_\_\_  
Address

\_\_\_\_\_  
Home Telephone Work Telephone Date of Birth

Approved and Witnessed by (Choose one):

\_\_\_\_\_  
Volunteer Chief Name (Please Print) Signature/Date

\_\_\_\_\_  
Departmental Duty Officer Name (Please Print) Signature/Date

Duty Chief Notified by: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Received By EOC:

\_\_\_\_\_  
Signature Date

**FAX TO: 301-925-6595**