

\*\*\* RIDE ALONG INFORMATION \*\*\*

Monroeville Fire Co. No. 4 offers the opportunity for interested individuals to conduct a ride-along so you can experience a day-in-the-life of the dedicated men and women of Station #4. You do not have to be affiliated with another Fire or EMS service to conduct a ride-along, however, if you are not your participation may be limited. Firefighter duties are inherently dangerous and concern by Monroeville Fire Co. No. 4 shall be given to the participant, however, the utmost importance shall lie in the member's attention to duty.

All participants must read the attached rules and regulations, then print out and complete the attached form before faxing it to the fire station at least two weeks in advance of wishing to ride.

**RIDE-ALONG RULES AND REGULATIONS:**

1. No observer/ride-along will engage in activity on the fire ground, EMS scene or training operation without approval from an authorized Station Officer of Monroeville Fire Co. No. 4
2. No still/video cameras or camera phones will be permitted on the ride along.
3. Use of tobacco products is prohibited in the fire station or any Monroeville Fire Co. No. 4 vehicle.
4. Riders are required to maintain a professional appearance and are asked to wear dark blue work pants and a dark blue polo/tee shirt. Dark socks and sturdy and supportive black shoes or boots, appropriate hat, coat, and gloves for adverse weather conditions. **NO** tee shirts or jackets with inappropriate graphics or language, sandals or open toed shoes, dangling jewelry.
5. Participant shall bring their own meals or may opt to 'buy in' with the duty crew if food is purchased.
6. Ride-along personnel are allowed access to the lounges, kitchen, weight room, apparatus room and rest rooms. If Participant wishes to spend the night, they will be assigned a bunk area by the house officer. Offices are restricted areas and are off limits to ride-along personnel.
7. Riders will adhere to Monroeville Fire Co. No. 4 Standard Operating Guidelines and will follow directives from officers at all times.
8. Participant must behave in a respectful and courteous manner at all times.
9. The applicant agrees to keep confidential all observations and conversations which may emerge as a result of their participation in this program. The applicant may overhear communications made by a patient to EMS personnel or between EMS personnel in the course of their duties in providing patient care, and those communications may be subject to a legal privilege of confidentiality. This includes the prohibition of the capture and/or dissemination of any pictures, video or audio.
10. No concealed weapons will be permitted during ride-along.

**RIDE-ALONG WAIVER**

Name: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

List any Allergies/Disabilities: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

Date/Time Requested for Ride-Along: \_\_\_\_\_ Time: \_\_\_\_\_

I, \_\_\_\_\_, on the above, hereby relinquish all liability of the Monroeville Volunteer Fire Company #4 and Monroeville EMS, Inc. from any injuries, motor vehicle accidents or death incurred by participating in any incidents assigned to either of the aforementioned public safety entities.

Monroeville Volunteer Fire Company #4 or Monroeville EMS, Inc. shall not be responsible for any damages to any personal items, vehicles in parking lot or any other equipment on your person while at the station or on any incident.

I understand that there are certain incidents while participating in the ride-along program that are hazardous and detrimental to my health and well-being and understand that I am participating at my own risk.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approving Officer Signature: \_\_\_\_\_ Date: \_\_\_\_\_