



RIDE ALONG PARTICIPANT'S WAIVER, RELEASE AND HOLD HARMLESS

1. I, the undersigned, have voluntarily requested to observe the operations and functions of North County Regional Fire Authority (the "Authority"). As such, I will be allowed to ride along with Authority personnel on Authority apparatus during training and emergency responses and participate in those training exercises and emergency responses (the "Program").
2. I represent that participation in the Program will allow me to gain valuable experience by training with and responding with Authority personnel to emergency incidents and is therefore of personal value to me.
3. I am aware of the inherent risks of training and responding as a fire fighter, including the risk of serious bodily injury or death. I understand that observing the operations and functions of the Authority may subject me to unpredictable and/or dangerous situations. During my observations, I may have the opportunity to ride in a car, ladder apparatus, engine apparatus, aid/medic unit, fireboat or other equipment operated by Authority personnel. I assume full responsibility for all injuries, death and/or damages I may suffer as a result of my participation in the Program, regardless of whether the injuries, death and/or damages may be caused by the sole or concurrent negligence of the Authority.
4. For and in part consideration of the Authority allowing me to participate in the Program and as an inducement to the Authority, I hereby waive any claim that I may hereinafter have against the Authority, its commissioners, employees or volunteers arising from or related to my participation in the Program.
5. For and in part consideration of the Authority allowing me to participate in the Program and as an inducement to the Authority, I hereby release the Authority, its commissioners, employees or volunteers from any and all liability whatsoever for any injuries, death, claims, demands, damages and/or causes of action, whether known or unknown, anticipated or unanticipated, arising from or related to my participation in the Program.
6. For and in part consideration of the Authority allowing me to participate in the Program and as an inducement to the Authority, I hereby agree to save, defend and hold the Authority, its commissioners, employees or volunteers harmless from any claim, demand, damage or cause of action, whether known or unknown, anticipated or unanticipated, brought by myself or on my behalf or derived from my injury or death during participation in the Program.
7. Without limiting the foregoing, this waiver, release and hold harmless shall apply to all claims under the Washington State Workers' Compensation statutes, the Washington State Volunteer Pension and Relief Board statute or any other similar state or federal program.
8. This waiver, release and hold harmless shall be binding on my heirs, successors and assigns.

THE UNDERSIGNED REPRESENTS AND WARRANTS THAT HE/SHE IS EIGHTEEN (18) YEARS OF AGE (OR IF LESS THAN 18 YEARS, THAT PARENT OR LEGAL GUARDIAN WILL ALSO SIGN THIS FORM), HAS READ AND UNDERSTANDS THE TERMS AND CONDITIONS HEREIN. IN PARTICULAR THE UNDERSIGNED REPRESENTS AND WARRANTS THAT HE/SHE UNDERSTANDS THAT THIS DOCUMENT IS A WAIVER AND RELEASE OF ALL RIGHTS TO MAKE A CLAIM AGAINST NORTH COUNTY REGIONAL FIRE AUTHORITY, ITS COMMISSIONERS, EMPLOYEES OR VOLUNTEERS.

*Participant Name
(Printed):*

*Signature of
Participant:*

Date:

If Participant is under 18:

I certify that I am the parent or legal guardian of the participant named above; that I have read and understood the foregoing release; and that I join in the release without reservation, granting full consent and authorization for the above-named person to participate in the activity.

*Parent/Guardian
Name (Printed):*

*Signature of
Parent/Guardian:*

Date: