



2024-2025 Explorer Program

August 1, 2024 – July 31, 2025

PARENT / LEGAL GUARDIAN'S AUTHORIZATION AND RELEASE PARTICIPATION, MEDICAL ASSISTANCE and NCRFA LIABILITY

North County Regional Fire Authority (NCRFA) is pleased to welcome young community members as participants in our Explorer program. Being an Explorer provides youth age 14 and older a SAFE and CHALLENGING opportunity to experience fire and emergency medical services professions in a learning environment, growing their physical fitness while building competency in leadership and personal accountability. While we prefer to include **all** young people who meet Explorer program requirements, participation may be limited based on availability of Explorer program Supervisors or other NCRFA limitations. **Please read this Authorization and Liability Release carefully. It is required prior to new Explorer participation, and must be renewed annually for returning Explorers, or upon request.**

PARTICIPATION AUTHORIZATION

I, _____ [print or type full legal name] am the [check one] Parent Legal Guardian of _____ [print or type full legal name of Explorer Participant]. As parent or legal guardian of the child named above, I give my permission for my child who is at least age 14 on _____ [print or select birth date] to participate in **ALL** components of North County Regional Fire Authority's Explorer program. I also give my permission for representatives of North County Regional Fire Authority transport my child in NCRFA emergency apparatus or non-emergency vehicles during non-emergency Explorer program activities.

TREATMENT AUTHORIZATION FOR MEDICAL EMERGENCIES AND NON-EMERGENCY FIRST AID

[initial each]

_____ I understand that the program will include minimal risk due to hands-on training activities with careful, trained supervision; however, unexpected events may occur.

_____ Although limited in nature and risk, I understand the nature of first-responder work may include Explorer participants witnessing actual emergency incidents and/or being exposed to or discussion of fire or medical emergency incidents, as deemed appropriate by the Explorer program Supervisor.

_____ Understanding the above risks, I have determined that my child named above is fully capable, medically, emotionally, and otherwise, of participating in Explorer program activities; Obtaining clearance from a qualified healthcare provider for their participation is at my own discretion.

_____ I authorize North County Regional Fire Authority to provide non-emergency first-aid.

_____ I authorize North County Regional Fire Authority or other responding agency to provide emergency medical care.

_____ I pre-authorize any and all emergency medical treatment deemed necessary by emergency responders and/or treating emergency department personnel, including medical evacuations and medical treatments deemed necessary in the judgement of the treating personnel.

RELEASE

[initial each]

_____ By signing this release, I agree that if my child is harmed or injured in any way while participating in the Explorer program, I voluntarily release North County Regional Fire Authority, and all personnel, staff, and Board of Commissioners of North County Regional Fire Authority in the past, present or future, from any and all liability for injuries or illnesses sustained by participation in the Explorer program.

_____ I understand and agree that this release applies to not only me, but also my estate, heirs, and assigns.

_____ In the event some other person or entity seeks compensation for these released liabilities, my estate or I, will indemnify and hold harmless North County Regional Fire Authority.

AUTHORIZATION FOR PHOTOGRAPHS, VIDEO, AND/OR PUBLICITY

I understand that photographs and/or video may or may not be taken of my child during their participation in the Explorer program. I give my permission for North County Regional Fire Authority to use photographs or video for training, informational, and/or promotional reasons, including but not limited to use in training materials, brochures, videos, social media of North County Regional Fire Authority, program reporting or debriefs or for other similar purposes.

Our Commitment to Diversity, Inclusion, and Non-Discrimination in Explorer Program

North County Regional Fire Authority values a diverse and inclusive workforce. We also value diverse and inclusive participation in our Explorer program, seeking to include all those who apply for and are qualified to participate in the Explorer program. To support our commitment, participants will not be included or excluded based on their race, color, creed, religion, gender, sex or sexual orientation, age (those between 14 and 20 as described), marital status, family status or plans, disability, veteran's status, or any other category protected by law.

Requesting a reasonable accommodation to participate in the application process for the Explorer program or while a participant in the Explorer program may be initiated by contacting the Human Resources department at HR@northcountyfireems.com or 360-629-2184.

Parent/Guardian Authorization and Release: I, _____ [print full legal name of parent or guardian], have read this Permission, Authorization and Release, I understand it, and I fully agree to all its terms without exception. I understand I have the right to withdraw my permission, authorization, and release for my child at any time by providing NCRFA written notice to HR@northcountyfireems.com AND/OR written notice to the Explorer Supervisor, with a copy provided to HR@northcountyfireems.com. Such withdrawal of permission, authorization and release is not retroactive, and will constitute withdrawal of the participant from the Explorer program.

Signature of parent/guardian: _____ Date: _____

Preferred email address of parent/guardian: _____

Preferred phone contact of parent/guardian _____

Explorer's Full Legal Name (print): _____ Age as of 8/1/2024: _____

Explorer's signature: _____

REQUIRED ATTACHMENTS

Please review carefully all the information below. Once **all** required information listed below has been submitted to HR@northcountyfireems.com, NCRFA will review application for participation and notify both the parent/guardian and applicant whether they are accepted into the Explorer program and other necessary information.

1. A completed **Parent/Legal Guardian's Authorization and Release** form (this form)
2. Documentation of Explorer's Age and Current Photo, by providing **one of the options** below:
 - a. Copy of **Birth Certificate** of Explorer **AND** copy of most recent **School Photo ID**
OR
 - b. Copy of **WA Driver's License** (if applicable) **OR** Copy of **Learner's Permit or State ID**
3. Copy of **Explorer's Medical Insurance Card**
4. Completed **NCRFA Emergency Contact** form
5. Completed **Explorer's Participant Application** form
6. **For Age 18 -20 Explorer participants only:** If participant is already 18, 19, or 20, or will turn that age while participating in the Explorer program, NCRFA must be provided with proof that the participant is enrolled in and participating in one of the following (or is on a scheduled break):
 - a. High School,
 - b. Running Start or equivalent program,
 - c. an alternative vocational program authorized by their school district,
 - d. registered as Home Schooled student,
 - e. or other proof acceptable to North County Regional Fire Authority that the participant is actively enrolled in and participating in an educational program that is not a college/post-secondary education program, nor is it an approved Apprenticeship program.

Please contact HR@northcountyfireems.com for questions regarding participation requirements or if the participant has special circumstances you request North County Regional Fire Authority consider on an exception basis.