



Templeton Fire Department

206 5th Street – PO Box 780 – Templeton, CA 93465

(805) 434-4911 – www.templetonfd.org

DECLARATION OF ASSUMPTION OF RISK AND RELEASE OF LIABILITY

(Read this document in full before signing)

I, _____ the undersigned, declare the following: I am _____ years of age, and not a member of the Templeton Fire Department. I have made a voluntary request to participate in a Ride-Along Program of the Fire Department. During this time, I understand I will accompany any member of the Fire Department to whom I am assigned during the performance of his/her official duties. These duties may include riding with said officer in a Fire Department vehicle and being present at scene of a fire or other emergency.

I understand the Fire Department will allow me to participate in the Ride-Along Program only upon my agreement of the following conditions: that I assume the risks involved in said participation and that I release and hold harmless the Templeton Community Services District, its officers, agents and employees from all liability.

I understand the duties of the members of the Fire Department are inherently dangerous. I also understand I may be subjected to the risk of death or personal injury or of damage to my property during my participation in the Ride-Along Program. I further understand said risks may arise from, but may not be limited to the following: explosions, electrocution, the escape of radioactive substances; the effects of wind, rain, fire and gas; vehicular collision; and air or blood-borne pathogens. I freely and voluntarily assume all said inherent risks, whether or not they are listed herein. In consideration of my being permitted to participate in the Ride-Along Program, I agree to be bound by all orders, rules, and regulations of the Templeton Fire Department, and to promptly obey all instructions of any Fire Department officer to whom I am assigned.

I understand and agree to keep all information obtained in the station or while accompanying Templeton Fire Department confidential. To protect our residents and visitors privacy, no cameras or picture taking will be allowed.

I hereby release the Templeton Community Services District, its officers, agents, and employees from any and all liability arising from participation in the Ride-Along Program. I have read and understand the contents of this document and sign the same of my own free will. I declare under penalty of perjury that the foregoing is true and correct.

Executed this _____ day of _____, in Templeton, California

(Signature of Applicant/Declarant)