



LOVELAND FIRE RESCUE AUTHORITY

Ride-Along Confidentiality Agreement & Release of Liability Form

I am a:

- Board Member
- Applicant for Employment
- Family Member
- Community Member
- Other: _____

Name: _____ Date: _____

Address: _____

Phone Number: _____ Email: _____

Emergency Contact:

Name: _____ Relationship: _____

Phone Number 1: _____ Phone Number 2: _____

Appropriate attire must be worn. Clothing must be clean and in good condition. The Fire Authority may cancel the ride based on your appearance, attitude or conduct. You must follow the Fire Authority's safety rules. If you do not follow the safety rules, the ride may be terminated and you may not be permitted to ride in a Fire Authority apparatus or vehicle in the future.

NOTICE OF INHERENTLY DANGEROUS ACTIVITY

RIDING IN A FIRE AUTHORITY APPARATUS OR VEHICLE AND/OR ACCOMPANYING FIRE AUTHORITY PERSONNEL IS AN INHERENTLY DANGEROUS ACTIVITY THAT CAN RESULT IN EXPOSURE TO HAZARDOUS SITUATIONS AND MAY RESULT IN SEVERE PERMANENT INJURY OR DEATH.

ASSUMPTION OF RISK: I, individually and on behalf of my family members, heirs and assigns, having read and thoroughly understood the above NOTICE OF INHERENTLY DANGEROUS ACTIVITY, acknowledge that riding in a Fire Authority apparatus or vehicle and/or accompanying Fire Authority personnel is an inherently dangerous activity that can result in severe permanent injury or death, and knowingly assume any and all risks associated with or arising from riding in a Fire Authority apparatus or vehicle and/or accompanying Fire Authority personnel.

RELEASE OF LIABILITY: I, individually and on behalf of my family members, heirs and assigns, release, waive and discharge the Fire Authority and its officers, directors, employees, volunteers, agents and representatives from any and all liability, causes of action under any theory of law or equity, claims and demands, damages, costs, expenses and compensation, arising from or relating to any injury or damages to person or property incurred as a result of riding in a Fire Authority apparatus or vehicle and/or accompanying Fire Authority personnel. I understand the Fire Authority's insurance does not cover any aspect of my riding in a Fire Authority apparatus or vehicle and/or

accompanying Fire Authority personnel, and I expressly assume all responsibility for securing appropriate insurance coverage.

CONFIDENTIALITY: I understand the Fire Authority provides private and confidential services to patients and that I am a crucial step in respecting the privacy rights of these patients. I understand it may be necessary, in the rendering of Fire Authority services, that patients provide confidential personal information, that such information may exist in a variety of forms, including electronic, oral, written or photographic formats, and that all such information is strictly confidential and protected from improper use and disclosure by federal and state laws. I understand that while riding on any Fire Authority apparatus or vehicle or accompanying Fire Authority personnel, I may receive, come in contact with, observe, hear or otherwise learn of confidential personal information of one or more individuals. I agree to comply with the Fire Authority's confidentially and security policies and procedures, and I will not disclose the confidential personal information to anyone.

INDEMNIFICATION: I agree to indemnify, defend, and hold harmless the Fire Authority and its officers, directors, employees, volunteers, agents and representatives from and against any loss, liability, damage, claim, cost or expense (including reasonable attorneys' fees, costs and expenses) of any kind or nature whatsoever resulting from riding in a Fire Authority apparatus or vehicle and/or accompanying Fire Authority personnel. I agree the Fire Authority has sole discretion in selecting legal counsel even though I am solely responsible for paying the fees and costs.

GOVERNMENTAL IMMUNITY: Nothing herein limit the privileges and protections afforded the Fire Authority and its officers, directors, employees, volunteers, agents, and representatives under federal and state constitutional, statutory or common law, including but not limited to the Colorado Governmental Immunity Act, C.R.S. § 24-10-101, *et seq.*

ADDITIONAL TERMS: Colorado law governs this document. This document states the entire agreement between the Fire Authority and me, and there are no other oral or written agreements or understandings. This document may only be amended by another document signed by the Fire Authority and me. If any provision is held invalid or unenforceable, all other provisions shall continue in full force and effect. This document shall inure to the benefit of the Fire Authority and be binding on me, and my legal representatives, heirs and assigns. This document shall not confer rights on any person or entity who has not signed this document. In any dispute, the prevailing party shall be awarded its/his/her reasonable attorneys' fees, costs and expenses, including any attorneys' fees, costs and expenses incurred in collecting upon any judgment, order or award. This document may be signed in several counterparts and by facsimile or electronic pdf, each of which shall constitute an original and all of which shall constitute one and the same instrument.

I have read this *Ride-Along Confidentiality Agreement & Release of Liability Form*, and understand what this document means. By signing my name below, I hereby voluntarily accept the terms stated in this form.

NOTICE
You must be at least 18 years old to participate in the ride-along.

By initialing here, I certify that I am 18 years of age or older: _____

Signature

Date

Print Name