



ALBANY FIRE DEPARTMENT RIDE ALONG APPLICATION

(Please Print)

Name: _____ Date of Birth: _____
Last First Middle Month/Day/Year

Home Address: _____
Number Street City State Zip Code

Driver's License Number: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____

School Currently Attending: _____
Name Address

In case of an emergency notify: _____ Relationship: _____

Work Phone: _____ Home Phone: _____ Cell Phone: _____

Address: _____
Number Street City State Zip Code

Type of Ride-Along: Ambulance Fire Engine Both

E-mail Address: _____

Purpose of Ride-Along (Explain in one paragraph): _____

Applicants under the age of 18 years require authorization from their parent or guardian. Please schedule as far in advance as possible (minimum of 14 days) in order to process your application. A ride along is only allowed Monday through Friday. Applicants are not allowed to ride along on holidays. We ask that you provide us with two dates with appropriate times in order to schedule your ride along. List the dates in order of priority. Only one date will be selected unless an agreement has been made with the shift officer. You will be contacted by telephone or E-mail to confirm whether or not there is a vacancy for the dates and times you have selected.

Date you want to ride: _____ Desired start time: _____ Desired end time: _____
Month/Day/Year (0800 to 1700 hours) (800 to 1700 hours)

Date you want to ride: _____ Desired start time: _____ Desired end time: _____
Month/Day/Year (0800 to 1700 hours) (800 to 1700 hours)

(OVER)

The applicant hereby acknowledges and declares that this application is made with the following understandings and stipulations:

1. The applicant will ride as a passenger in vehicles owned by the City of Albany and operated by employees of the Albany Fire Department. Such transportation is furnished to the applicant purely gratuitously, as a revocable privilege, so that the applicant may observe the daily, routine operation of the Albany Fire Department.
2. Ride along applicants should be in good health, free of all ailments and injuries. The Albany Fire Department encourages applicants to reschedule if they are ill the day of the ride along.
3. The Albany Fire Department response may involve the operation of fire vehicles in emergency conditions as authorized emergency vehicles as permitted by State Law. Such operation may involve greater than normal speeds, justified disregard of certain traffic control devices and rules of the road, etc. The circumstances requiring emergency operation may include, but are not limited to, expeditious response to a reported emergency or transportation of a critical patient. Such circumstances are so varied that an exhaustive list cannot reasonably be compiled. Determination of when to operate a fire vehicle as an emergency vehicle is within the sole discretion of the Albany Fire Department and its officers.
4. Fire and Paramedic work involves, by its very nature, many hazards beyond the power of the Albany Fire Department and its officers to control. At all times while riding as an observer, the applicant agrees, without question or hesitation, to abide by the directions of Albany Fire Department personnel; and further recognizes that those directions may not effectively eliminate risk to the applicant, which risk the applicant assumes.
5. The applicant recognizes that in an emergency, Albany Fire Department employees may not be able to both perform their duty and dismiss the applicant from their presence, thereby subjecting the applicant to the same risks as is presented to the employee. The applicant recognizes and acknowledges assumption of this risk.
6. 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 a paramedic or between paramedics in the course of the paramedics' duties in providing patient care, and those communications may be subject to a legal privilege of confidentiality.
7. The applicant will not use any audio, video or cell phone devices during the course of the ride along.
8. The applicant will not use any tobacco products during the course of the ride along. The applicant will not carry any weapons in the course of the ride along.
9. The applicant recognizes that a portion of their ride along may be spent in an operational fire station. Fire stations are used as living quarters for on-duty crews and include such activities as physical fitness, showering, and sleeping.
10. This ride along may be terminated at the discretion of the Fire Chief or shift officer at any time.
11. The Albany Fire Department strongly encourages the applicant to obtain the following vaccinations prior to riding in a fire engine or ambulance: Tetanus, Measles, Mumps, Rubella (MMR), and Hepatitis A & B series.
12. Consent to Medical Assistance. The applicant recognizes that if he or she requires medical assistance, including first aid and/or ambulance service, the Albany Fire Department will arrange for such assistance and service, consent for which is hereby given, and agrees to pay any and all costs incurred or accruing in connection therewith.

(OVER)

13. Release of Liability. In consideration of the acceptance of this application and granting by the Albany Fire Department of the privilege of acting as a ride along observer, the applicant does hereby forever release, discharge and acquit the City of Albany, its officers, agents and employees from any and all claims for death, personal injury and/or damage to property of any nature which may arise from or in connection with their participation hereunder.

14. Consent to a Background Investigation. The applicant agrees to a background investigation at the discretion of the Albany Fire Department and its officers. The investigation may include, but is not limited to, a report from the Albany Police Department, Department of Motor Vehicles, Department of Justice, District Attorney's Office, and speaking with family, friends, co-workers and neighbors about the applicant.

The applicant declares to have carefully read and fully understand the foregoing and, by signature affixed hereto, accepts the same and assents thereto in its entirety:

APPLICANT: _____ DATE: _____
Signature Month/Day/Year

PARENT OR LEGAL GUARDIAN MUST SIGN THE FOLLOWING IF THE APPLICANT IS UNDER 18 YEARS OF AGE

I, _____ being the parent or legal guardian of the above applicant, do hereby certify that I have carefully read and fully understand the foregoing application; and do hereby personally and on behalf of the said applicant accept and assent to their participation under the terms, stipulations and conditions set forth in the said application, including the CONSENT TO MEDICAL ASSISTANCE (paragraph 12), RELEASE OF LIABILITY (paragraph 13), and the CONSENT TO A BACKGROUND INVESTIGATION (paragraph 14) set forth therein.

PARENT OR GUARDIAN: _____ DATE: _____
Signature Month/Day/Year

-----ALBANY FIRE DEPARTMENT USE ONLY-----

Background investigation completed: _____ APD report attached: Yes No
Month/Day/Year

Shift officer's signature: _____ Recommended: Yes No Date: _____

Date applicant will ride: _____ Time: _____ Shift: _____

Shift Officer's Comments: _____

Shift Officers: Complete the section below after the ride along is completed

Date Applicant Rode: _____ From: _____ To: _____

Shift Officer's Signature: _____ Date: _____



Albany Fire Department Ride Along Program

What should I wear?

Remember you're climbing on and off of an ambulance or fire engine all day so wear good shoes, long pants and a nice collared shirt. No hand bags, exposed necklaces or bracelets. Just carry your ID and a few dollars for lunch and snacks. If you have any questions please ask the shift officer before your ride along.

What will I do during calls?

If you are riding on the fire engine or ambulance you will only observe Department personnel at the scene of an incident. You will take direction from the engine officer or firefighters at the scene of an incident. The ambulance will be transporting patients to an emergency department. While riding on the ambulance you will take direction from one of the firefighter/paramedics at the scene of the incident and at the hospital. Remember your ride along is for observation only. Albany Fire Department staff will direct you throughout the shift. It is important to remember:

- Never remove your seat belt before the unit is stopped and in park.
- Stay out of traffic at all times, remember passing cars are very dangerous.
- Never wander away from Department personnel on scene or at the hospital.
- Stay alert at all times; know what is going on around you.

Final Reminders:

Remember to tell your teacher or supervisor about the program. You will need to review the application with your parents, teacher and supervisor if applicable.

You will need to have the Albany Fire Department Ride Along Application completed 2 weeks before your scheduled ride along.

If you need to cancel at the last minute please call the shift officer at (510) 528-5770 x5. If you are sick please do not come in for your ride along. We will reschedule your date.

Remember HIPAA laws apply in the field as well as the hospital so please respect our patient's privacy at all times.

If you enjoyed your time at the Albany Fire Department and would like to send an e-mail to the fire house crew you can do so at the web address below.

<http://www.albanyca.org/index.aspx?recordid=13&page=20>.