



**WAIVER & LIABILITY RELEASE**  
Ride-Along Observer, San Luis Obispo Fire Department



**READ THIS DOCUMENT COMPLETELY BEFORE SIGNING**

The undersigned, not being a member of the City of San Luis Obispo Fire Department, has made a voluntary request for permission to ride as an observer in a Fire Department vehicle at a time when such vehicle is operated and manned by members of the San Luis Obispo Fire Department, and has further requested permission to accompany a member or members of San Luis Obispo Fire Department during the active performance of their official duties as a fire officer.

I, the undersigned, understand and acknowledge that the work and activities of the San Luis Obispo Fire Department are inherently dangerous, involving possible risk of physical injury, damage, expense, or loss to person or property and my attendance/participation in this activity exposes me to such dangers. I further understand that accidents can occur during these ride-alongs and that participants can occasionally suffer serious bodily injury. Nevertheless, **I HEREBY ASSUME THESE RISKS OF PARTICIPATING IN THE ABOVE-MENTIONED RIDE-ALONG.**

In return for allowing me to participate I hereby waive, release and discharge any and all claims for damages for death, personal injury, disability or property loss or damage of any kind which may hereafter accrue to me as a result of my participation in this activity. This release is expressly intended to discharge in advance the City of San Luis Obispo and its employees, agents and volunteers from and against any and all liability arising out of or connected in any way with my participation in this activity. **THIS RELEASE WILL APPLY EVEN THOUGH LIABILITY MAY ARISE OUT OF NEGLIGENCE OR CARELESSNESS ON THE PART OF THOSE DISCHARGED INCLUDING THEIR EMPLOYEES, AGENTS AND VOLUNTEERS.**

This Waiver and Liability Release shall apply to me, as well as any of my heirs, executors, or administrators.

Application Date: \_\_\_\_\_

Reason for Ride-Along: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_  
(Print – Last, First, Middle Initial)

Age: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Business: \_\_\_\_\_

Phone: \_\_\_\_\_

By my signature below, I hereby acknowledge that I have read this document and understand its contents.

Rider's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*YOUR RIDE CAN BE TERMINATED AT ANY TIME FOR THE CONVENIENCE OF THE DEPARTMENT.\***

For Department Use Only

Approved: \_\_\_\_\_  
On-Duty Battalion Chief

Date: \_\_\_\_\_

(THIS IS A DOUBLE-SIDED FORM)

TO: Ride-Along Observers

FROM: Todd Tuggle Fire Chief

Thank you for expressing a desire to ride-along with this Fire Department. We are proud of what we do and are happy to share with you how we operate. The following rules will assist in making your experience safe and worthwhile.

You must be 18 years old and have signed the release form on the opposite side of this document.

You are an observer. **You must not participate in any capacity on any emergency incident. Helping is not allowed.** Again, you are just an observer.

On freeway incidents, you may not leave the safety of the vehicle. You must remain in the cab or passenger compartment.

When observing at fire scenes and traffic accidents, you must remain close to the fire engine or vehicle on which you arrived so that the company officer may know of your general whereabouts.

We allow ride-alongs from 8:00 a.m. to 5:00 p.m., Monday through Friday. For your safety or at our convenience, we may terminate the ride-along at any time.

We require you to dress appropriately and complement our image of being neat, clean and professional. We expect you to wear full-sturdy shoes (tennis shoes, boots, etc.), long-sleeve shirt or sweater, and long pants.

Only one person is allowed to ride-along per company and we limit participation to once every six months.

Thank you in advance for adhering to our rules. Please sign below that you have read the rules and understand their content.

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Signature

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