

COMMUNITY RELATIONS	GO 10.1
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APPROVED BY:	EFFECTIVE DATE: 01-01-2012

### Purpose:

To provide a department Ride Along program to encourage community awareness of the Loveland Fire Rescue Authority operations as well as allied professional cooperation and networking.

# Responsibility:

It shall be the responsibility of all personnel involved in the scheduling, briefing, and supervision of ride along participants to follow this GO to ensure safety of the individual.

- General Program Goal: Loveland Fire Rescue Authority subscribes to the fact that we are a community partner
  providing a public safety service. The goal of the ride along program is to acquaint any interested citizen or
  fellow firefighter in the operation of our fire and rescue department. It should be understood that, because of
  potential danger to riders, the ride along program is a privilege and that application must be made and
  approved prior to any ride along.
- 2. **Application Process:** Person wishing to participate in the ride along program must make application by completing all the required forms. These include:
  - Ride Along Program Release Agreement
  - Ride Along Request Application

Completed forms should be submitted to the Community Safety Division to initiate the approval process. Once approved, the applicant shall be notified and advised of the date, time and reporting instructions for the ride along. Applicants will be limited to four (4) ride alongs per year. Any exceptions must be approved by the Chief. Please keep the GO 10.1 pages for you to review and understand prior to attending your ride along. Applications need to be turned-in at least one week prior to your requested ride along date. Applicants may either mail or bring in the documents to: 410 E. Fifth St., Loveland, CO 80537. You may also email the scanned-in documents to Bonnie Wright at mail to: mailto:bonnie.wright@lfra.org

## 3. Specific Rules for a Ride Along:

- A. The Officer in charge of the station where a ride along has been approved is responsible to brief the rider prior to the actual ride along of the risks involved and the guidelines contained in the General Operations Policy.
- B. Other Specific Rules for Riders Include: (This page to be included with the Ride Along Release form in order to provide rider with pertinent information)
  - 1. Observers and Limited Participants must be 18 years old or older, unless approved by the Chief.
  - 2. No "uniforms" are allowed. Preferably, riders will wear a navy blue shirt and pants or jeans that are not tattered, torn, faded or worn hanging low. No open toe shoes or shorts are allowed. Rider's clothing attire should reflect a positive public appearance. A firefighter's coat or vest and hard-hat will be issued to riders. Appropriate cold-weather gear (gloves, hat, socks, etc.) are the responsibility of the rider.



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- 3. The ride along may be terminated for any reason during the scheduled ride by the officer in charge of the station.
- 4. Cameras are allowed although no identifying picture of any victim may be reproduced in any form.
- 5. The officer in charge of the rider has the responsibility to ensure that the rider <u>does not</u> participate in any risk-taking action. No Exceptions.
- 6. Riders shall follow all officer and firefighter instructions and directions.
- 7. Riders should not offer comments or instructions with victims or other members of the public while responding to, or on scene of an incident.
- 8. Any questions asked of the rider by bystanders or other agency representatives should be forwarded to the Fire Rescue Authority personnel on scene.
- Riders may be exposed to privileged information and identities during the course of a ride along. This information MUST remain CONFIDENTIAL. No repeat of a victim, patient, or other person's name, address, or circumstance is allowed.
- 10. Riders may respond Code 3 with assigned crews. The rider must ride in a designated seat, with seat belt securely fastened, prior to response. Riders must remain in the designated seat until they are instructed to release.
- 11. Riders must be cautious and alert around incident scenes and be especially alert to moving vehicles, hose lines, persons carrying tools, noise hazards, and unstable footing.
- 12. For the safety of the rider, the Officer in charge may decide to drop off the rider en route to an incident due to the potential environmental risks associated with that incident. Examples could include wildland fires, hazardous materials release, or other situations where the rider would be at risk just being in the apparatus. The Officer may instruct the rider to leave the immediate incident area and seek shelter. Under these conditions, the rider shall seek a safe, secure area until the rider is allowed to approach the incident or other arrangements have been made to leave the area.
- 13. If there is an outside rider and a volunteer firefighter requesting to ride, the volunteer firefighter always takes priority.
- 14. Riders are allowed to ride between the hours of 07:30 a.m. to 10:00 p.m. It shall be at the discretion of the Station Officer to deviate from these designated ride along times.

#### 4. Meals and Snacks:

- Pack and bring all your meals that your shift ride along will encompass; including snacks.
- Water is available at the station and use of the kitchen including the refrigerator, microwave, etc.
- You will be able to eat with the firefighters in the dayroom.

### LOVELAND FIRE & RESCUE DEPARTMENT RIDE ALONG PROGRAM RELEASE FORM

The Loveland Fire & Rescue Department is pleased to have you participate in our Ride Along Program. The program exists to provide interested citizens and fellow fire fighters an informative and enjoyable insight into the operations of our Fire Department.

You will be assigned to a station and ride on an Engine under the guidance of the Engine Company Officer. You will be briefed of the risks involved and our Department's expectations. You should dress appropriately for weather conditions and to ensure a positive public appearance.

#### RELEASE OF CLAIMS, INDEMNITY AGREEMENT, & COVENANT NOT TO SUE

WHEREAS, I,	, not being a member of the City of Loveland, Colorado Fire and Rescue Department, have made a voluntary
request to ride as a guest in a v	ehicle assigned to the Loveland Fire and Rescue Department and to accompany members of the Fire and Rescue
Department during the performa	nce of their official duties, and

WHEREAS, the Loveland Fire and Rescue Department is willing to allow me to ride as a guest in a vehicle assigned to that department and to accompany members of said department during the performance of their duties,

#### I DO HEREBY AGREE:

- 1. That I am aware that the work of the Fire and Rescue Department is inherently dangerous and that I may be subjected to the risk of death, personal injury or damage to my property by accompanying members of the department during the performance of their official duties and I freely, voluntarily and with such knowledge, assume the risk or risks associated with such activities, including but not limited to: death, personal injury, or property damage arising from or in any way connected with: the use of fire and rescue vehicles used for fire and rescue purposes, breach of peace, fire, explosives, electrocution or the escape of hazardous substances, or the sustaining of injury in any other way while accompanying members of the department during the performance of their official duties.
- 2. That I exempt and release the City of Loveland, its public officials, volunteers and employees and their sureties, all members of the Loveland Fire and Rescue Department and their sureties, and the Loveland Rural Fire Protection District, and each of them from any and all liability, claims, demands or actions or causes of action whatsoever arising out of any damage, loss or injury to me or my property incurred while riding in any vehicle assigned to the Loveland Fire and Rescue Department or while accompanying members of the department during the performance of their official duties or while on the premises of the Department or while in any other way participating in this ride along program, whether such loss, damage or injury results from the negligence of the City of Loveland, its public officials, volunteers, and employees and their sureties, any members of the Loveland Rural Fire Protection District, and each of them, or from some other cause.
- 3. For myself, my heirs, personal representative, executors, administrators and assigns to defend, indemnify and covenant not to sue the City of Loveland, its public officials, volunteers, and employees, any members of the Loveland Fire and Rescue Department, their sureties, and the Loveland Rural Fire Protection District, and each of them, against any and all manner of actions, causes of action, suits, debts, claims, demands, damages or liability or expenses of every kind and nature incurred or arising by reason of any actual or claimed negligent or wrongful act or omission by me or by them while riding in any vehicle assigned to the Loveland Fire and Rescue Department or while accompanying any member or members of the said Fire and Rescue Department during the performance of their duties, or while in any other way participating in this ride along program.

I hereby represent that I have carefully read and understand the contents of this document and sign the same of my own free will.

#### CAUTION: READ THIS DOCUMENT IN FULL BEFORE SIGNING

Date: Rider's Signature:				
Printed Name:	Date of Birth:			
Address:				
Emergency Contact/Phone:				
FOR OFFICIAL USE ONLY				
Firefighter (s)/Shift Assigned:				
Supervisor's Approval:	·			



# RIDE ALONG REQUEST

Loveland Fire & Rescue 410 E. 5<sup>th</sup> Street Loveland, CO 80537 (970) 962-2497

Date Requested:		Time Requested:					
Station Requested: 1	3	5	6	(Please circle			
Name:							
Last			First		N	Middle	
Address:							
Street			City		State		Zip
Telephone Numbers:							
	Day	time			Ŀ	Evening	
I want to ride along with visit, family friend, caree				escue be	ecause: (riding f	for class pr	oject, profession
Please list two reference	<del></del>						
Name	Phone Nu		ne Numl	per F	Relationshi	 ationship	
Name			Phor	ne Numl	oer F	Relationshi	<u></u>
This form must be accomp	anied b	y the R	Ride-Alon	g Policy,	GO 10.1 which I	has been re	viewed and signed
Signature of Applicant:_						Date:	
Type and number of I.D.	:						
Witness:	_				_Title:		
Signature of Fire Marsha	al or Ba	attalion	Chief:				