



200 South Main St.
Peculiar, Missouri 64078
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WEST PECULIAR FIRE PROTECTION DISTRICT

RELEASE OF LIABILITY/DRESS CODE

I, _____, voluntarily request permission to ride as an observer with the personnel of the West Peculiar Fire Protection District in the District's emergency vehicles on ____/____/____.

I understand that the following requirements must be met prior to riding/observing on District emergency vehicles: must be properly groomed, neatly trimmed facial hair, hair longer than shoulder length must be tied back, no earrings, wear a proper uniform shirt (identifying the agency your with), black or navy pants, dark socks, black shoes or boots, receive orientation from vehicle crew and if applicable, provide patient care only under the direct supervision and orders of the paramedic and/or officer in charge of patient care and/or the incident.

I have been fully advised of my position within said emergency vehicle and understand the inherent risks involved with riding in an emergency vehicle, and do hereby release and fully discharge the West Peculiar Fire Protection District, its officers and employees, servants or agents from any mishap or act of God which may occur while riding with the West Peculiar Fire Protection District emergency vehicles.

OBSERVER'S SIGNATURE

Date: _____

PARENT/GUARDIAN'S SIGNATURE

Date: _____

WITNESS'S SIGNATURE

Date: _____