



Phoenix Fire Department

Citizen Observer Program

M.P. 107.01



STATION TOUR, RIDE-A-LONG

Request Form

To request a Station Tour or Ride-a-long, please complete this form and return the original with signature to Jennifer Hill at Phoenix Fire Department Fire Investigations Unit at 150 S. 12th Street, Phoenix Az. 85034. Incomplete or emailed forms will not be processed. Contact Jennifer Hill at jennifer.hill@phoenix.gov with any questions.

Application Information

Requestor's Name	Phone Number	
Address	City	Requestors Email Address
Birthdate	Driver's License Number	Firefighter Development Program (referred by)

I would like to request: Please submit preferred dates/times

	Station #	Day	Date	Time
Station Tour				
Ride-A-Long				

Tour Guidelines

1. Tours must be scheduled 4 weeks in advance
2. Tours last approximately 30 minutes
3. At least one adult is required for every 5 children
4. All visitors must wear appropriate clothing and covered footwear (no swimsuits)
5. All stations are working and crews remain on duty and available for response during all tours
In the event a crew is called away during your visit we will reschedule for another day.

Please read and sign the **WAIVER AND RELEASE OF ALL CLAIMS**, by submitting this form, you acknowledge that you have read and understand the meaning of this waiver and release of all claims. Submit this Request Form and Waiver to: **Fire Investigation Unit at 150 S. 12th Street, Phoenix, Arizona 85034** for approval.



City of Phoenix

WAIVER AND RELEASE OF ALL CLAIMS

PHOENIX FIRE DEPARTMENT CITIZEN OBSERVER

THIS FORM MUST BE COMPLETED, SUBMITTED, AND APPROVED PRIOR TO ANY CITIZEN OBSERVER ACTIVITY

Please Read Carefully

In exchange for being allowed to participate in the above listed activity, I hereby for myself, my child, my heirs and assigns, agree to waive, release and forever discharge any and all claims, rights and causes of action against the City of Phoenix, its officers, officials, employees, agents, and volunteers (the "City"), for injury or damage caused or alleged to be caused in whole or in part by the negligence of the City. I understand that this means that I will not make any claims against or sue the City of Phoenix, its agents or employees, for injuries or damage sustained by me or my child. I recognize that this means I will not recover any money from the City of Phoenix, its agents or employees, for injuries or damage sustained by me.

I recognize that the negligence of the City of Phoenix may include, but is not limited to, acts or failure to act regarding facilities and equipment maintenance, field design, construction, instructions of City personnel, interpretation and enforcement of rules, provision of medical or emergency medical assistance, inattention, and supervision of participants and their surrounding environment.

I recognize that injuries and damage may be caused by any of the following: exercising with or without City equipment; falling; tripping; being pushed; running; sliding; exposure to bodily fluids, infection or disease; bodily reactions to insect or animal bites, food or materials used in the activity; striking or being struck by another individual; equipment used in the activity; a condition of the land or building where the activity is located; drowning; criminal acts of known or unknown persons; an error in administering first aid; or by a motor vehicle accident; and other similar acts, incidents or conditions.

The type of injuries may range from minor injuries and fractures to paralysis, brain damage, and death.

I understand and expressly agree that this waiver and release of all claims is intended to be as broad and inclusive as permitted by the laws of Arizona. If any portion of this waiver is held invalid, I agree that the remainder shall continue in full force and effect.

Also, and in addition to the above waiver and release, I understand and voluntarily assume all risks associated with my own participation in this activity. I am physically capable of participating in this activity. I have the necessary degree of skill, training, experience or ability to participate at the level I choose. I do not expect the City to coach, manage, instruct, or train me. I understand that the City does not carry insurance to cover participants, and that there would be an increase in the activity fee if the City were to provide insurance.

Approval to participate as a Citizen Observer of the Phoenix Fire Department is contingent upon the results obtained through a criminal background check. In signing below, I hereby authorize and agree that a background check will be performed prior to participation as a Citizen Observer. For that, I understand that I may be required to provide my full name, date of birth, gender, driver's license number, and last four digits of my social security number. I further understand that any decision made by the Phoenix Fire Department Security Manager, Executive Staff, or Command Officers with regard to my permission as a Citizen Observer is final and that my observation activity may be canceled at any time by Phoenix Fire Department employees without cause or notice.

I state that I have carefully read and fully understand the meaning of this waiver and release of all claims, and that I have voluntarily signed below.

<i>Print Participant's Name</i>		<i>Today's Date</i>
<i>Participants Address</i>		
<i>Participant's Signature</i>		

Juvenile's Parent/ Guardian Name (Print and Sign Signature) _____