



Warrington Community Ambulance Corps

Ride-Along Program Application

Name: _____ Date: _____

Dates Desired for Ride Along: _____

Address: _____
(Street) (City) (State) (ZIP)

Phone Number : _____
(Home) (Cell)

Have you ever participated in the Ride Along Program? No, If yes please explain when and where and how many times:

What is your reason for a ride along?

Potential Volunteer

Potential Employee

Education

Precepting

Paramedic

EMT

If precepting for class please provide your class location and dates

If accepted into the ride along program you will be required to complete a HIPPA (privacy) test and blood Borne pathogens. Is this acceptable? Yes or No

Please carefully read the release of liability and rules pertaining to the Ride Along Program:

Whereas, the undersigned desires to participate in the ride along program with Warrington Community Ambulance Corps (WCAC).

Whereas, WCAC has agreed to allow the undersigned to participate in the ride along program.

Now, therefore I have read the WCAC policy regarding the ride-along program and full understand its content. I have had all my questions or concerns answered to my satisfaction. I agree that if I should become hurt, while on duty, WCAC will not cover me.

RULES FOR RIDE ALONG PROGRAM

1. The minimum age to participate is 16 Years of Age. (If under 18 a parent signature is required to participate, which must be signed in the presence of the volunteer coordinator or line officer.)
2. The Ride-Along must have completed all required paper work (HIPAA, Blood Bourne Pathogens)
3. Proof of identification must also be copied and kept on file (valid driver's license, passport, etc.).
4. In order to participate in a Ride Along, potential applicant must have Basic Cardiac Life Support. (Certain exceptions can be made)
5. Ride Along participants are allowed a maximum of 24 hours. Ride Along are not permitted during the hours of 2300-0700.
6. You are required to listen to crew member instructions regarding scene safety. If a crew member does not feel safe with you coming in with them, they have the right to ask you to remain in the truck.
7. Drugs and alcohol are prohibited. Any student/observer displaying signs consistent with drug or alcohol use will be asked to leave WCAC property. The student's educational representative will then be notified. The Agency reserves the right to discontinue the student/observer's ride time when unprofessional behavior is displayed.
8. Ride-Along Participants must present themselves in a professional manner while riding at WCAC.
9. Clothing must be neat, clean, and free of holes.
10. Clothing with any derogatory comments or pictures is not permitted.
11. Footwear must be in good condition and free from holes. Footwear must consist of black boots with good tread. Any type of sandals, clogs, or heels is not permitted.
12. Excessive jewelry is not permitted.

- 13. Personal hygiene is very important. Hair must be clean and groomed. An excessive amount of makeup or strong perfume is not permitted.
- 14. At no time may a Ride-Along Participant wear clothing, patches, jackets, or hats that identify a certification that they do not hold. (For example: EMT, Paramedic, or CPR)

My signature below indicates that I have read the rules and regulations above and agree to comply with them. All my questions have been answered and I have no further question.

Signature of Applicant: _____ Date: _____

Printed Name: _____

Only required if the applicant is under 18

Parent Signature: _____ Date: _____

Parent Printed Name: _____

Signature of Line Officer/Volunteer Coordinator: _____

Date: _____