

Student Acknowledgement and Waiver

City of Waukesha – Waukesha County Technical College
Emergency Medical Services Occupations
Field Experience Program

Notice: Read this entire document carefully before signing it, and do not sign it unless you understand it completely and agree to its terms. If you do not understand it, you should consult with your own attorney – it contains terms that affect your legal rights.

Student participants in the City of Waukesha “Ride Along” Program for WCTC EMS Occupations students are required to execute this Acknowledgement and Waiver before being allowed to participate in the program.

In consideration of being allowed to participate in the program and accompany City of Waukesha EMS personnel in actual field experience, the undersigned Student acknowledges and agrees as follows:

- 1. Acceptance of Risk of Injury and Death.** Accompanying emergency medical services personnel on service runs in the field is a hazardous activity, and can result in personal injury and death. The Student, for himself or herself and on behalf his or her heirs, executors, personal representatives, insurers, conservators, and guardians accepts the risk of injury and death; waives any and all causes of action, lawsuits, damages, claims and demands of any nature arising from personal injury or death suffered by the Student in the course of the Student’s participation in the Ride Along Program or otherwise accompanying City of Waukesha EMS personnel on service runs; and releases the City of Waukesha and its officials, officers, agents, and employees from all such liabilities.
- 2. Rules and Supervision.** Student will be subject to the rules and supervision of the City of Waukesha while participating in the Program and accompanying City of Waukesha EMS personnel. Failure to observe rules or direction given by City personnel will result in the Student’s removal from the Program.
- 3. Assignment to Service Runs.** The Student’s assignment to service runs shall be in the sole discretion of the City of Waukesha Fire Department, and the City may refuse to assign the Student, or change the assignment of the Student, at any time.
- 4. No Warranty of Quality of Experience.** The City of Waukesha’s responsibility is to provide emergency medical and fire-protection services to its citizens. The Student’s participation in the Program is an opportunity to observe real-life situations and to participate to a certain degree in the delivery of emergency medical services. The City of Waukesha is not responsible for meeting any curriculum or credit requirements, and the City of Waukesha makes no representations or warranties concerning the quality or quantity of the educational experience the Student receives by participating in the Program.
- 5. Confidentiality.** The Student will be subject to all federal, state and municipal laws and rules regarding the confidentiality of information learned by the Student while participating in the Program, including medical information protected by the Health Insurance Portability

and Accountability Act, known as HIPAA. The Student's failure to observe these rules will result in the Student's removal from the Program.

- 6. Capacity to Contract.** The Student is at least 18 years of age, and is not subject to any condition rendering him or her incompetent to execute a contract. By signing this document, the Student agrees to be bound legally to its terms. The Student has signed this document willingly, voluntarily, and not under threat or duress.

Read and understand this document before signing it.

Date: _____

[Student signature above]

Print name: _____

Address: _____

Email: _____

Telephone: _____