

THE PERSON COMPLETING THIS WAIVER OF LIABILITY MUST BE AN ADULT OR THE LEGAL  
GUARDIAN OF THE EXPLORER.

**CLARK COUNTY FIRE DEPARTMENT EXPLORER PROGRAM**

**RELEASE AND WAIVER OF LIABILITY**

EXPLORER'S NAME: _____
ADDRESS _____ PHONE# _____

This section must be completed if Explorer is less than 18 years old)		
PARENT/GUARDIAN: _____		
ADDRESS: _____		
PHONE# - HOME: _____	WORK: _____	CELL: _____

EMERGENCY CONTACT NAME: _____	PHONE#: _____
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I \_\_\_\_\_ (EXPLORER OR **PARENT/GUARDIAN OF MINOR CHILD**) DESIRE TO VOLUNTARILY PARTICIPATE IN THE FIRE DEPARTMENT EXPLORER PROGRAM. I HEREBY VOLUNTARILY ASSUME AND ACCEPT ALL RESPONSIBILITY FOR MYSELF OR MY CHILD'S (IF A MINOR) BEHAVIOR WHILE A VOLUNTEER WITH THE CLARK COUNTY FIRE DEPARTMENT UNDER THE EXPLORER PROGRAM. I/MINOR UNDERSTAND THAT THE ACTIVITIES IN WHICH EXPLORERS PARTICIPATE (AS OUTLINED ON PAGE TWO OF THIS AGREEMENT), ARE PHYSICALLY DEMANDING AND AS SUCH, MAY INCLUDE RISK OF INJURY, ILLNESS, DISEASE OR DEATH, I/MINOR WILLINGLY ACCEPT AND ASSUME THE RISK.

I UNDERSTAND THAT I/MINOR AM RESPONSIBLE FOR ATTENDING ALL SAFETY TRAINING REQUIRED BY THE CLASS IN WHICH I/MINOR AM ENROLLED. I UNDERSTAND THAT I/MINOR MUST ABIDE BY ALL THE RULES AND POLICIES SET FORTH BY THE CLARK COUNTY FIRE DEPARTMENT, ("CCFD"). I/MINOR UNDERSTAND THAT THE RULES AND GUIDELINES OF THE CCFD ARE INTENDED TO PROTECT ME/MINOR AND OTHER EXPLORERS FROM HARM, TO PROTECT PROPERTY FROM DAMAGE, AND TO MAKE MY MINOR'S LEARNING EXPERIENCE AND THE LEARNING EXPERIENCE OF OTHER EXPLORERS ENJOYABLE. I UNDERSTAND THAT MY/MINOR'S FAILURE TO ABIDE BY THE RULES AND POLICIES MAY RESULT IN MY/MINOR'S BEING DISMISSED FROM PARTICIPATION IN THE EXPLORER PROGRAM.

I UNDERSTAND AND AGREE THAT CCFD RESERVES THE RIGHT TO USE PHOTOGRAPHIC AND VIDEO NEGATIVES AND/OR REPRODUCTIONS FOR DISPLAY, PUBLICATION AND OTHER PURPOSES. IMAGES REMAIN THE EXCLUSIVE PROPERTY OF CCFD. I UNDERSTAND MY OR MY CHILD'S IMAGE MAY BE USED IN DISPLAYS, PUBLICATIONS OR OTHER PURPOSES FOR WHICH I WILL NOT RECEIVE ANY FINANCIAL OR OTHER COMPENSATION OR REIMBURSEMENT.

I ACKNOWLEDGE THAT I/MINOR HAVE RECEIVED AND READ THE BOOKLET "A GUIDE FOR THE INJURED WORKER". I UNDERSTAND AND AGREE THAT I OR (MY MINOR CHILD) HAVE LIMITED COVERAGE AS A VOLUNTEER (AS DEFINED IN THE NEVADA REVISED STATUTES 616A.130), AND RELEASE ANY RIGHTS OR CLAIMS FOR DAMAGES IN EXCESS OF THOSE BENEFITS PURSUANT TO NRS 616.

I/PARENT/GUARDIAN AGREE TO HOLD HARMLESS CLARK COUNTY, ITS EMPLOYEES, AGENTS, AND ALL INDIVIDUALS ASSISTING IN AND CONDUCTING THE EXPLORER ACTIVITIES, FROM ALL LIABILITY OF ANY NATURE FOR ANY AND ALL INJURIES, LOSS OR DAMAGE SUFFERED AT OR IN ANY WAY CONNECTED TO PARTICIPATION IN THIS PROGRAM EXCEPT FOR THOSE BENEFITS AS PROVIDED BY NRS 616.

**VOLUNTEER EXPLORER ACTIVITY INCLUDES BUT IS NOT LIMITED TO THE FOLLOWING:** *(Participant (18 or older) or parent/guardian of minor child must initial each activity)*

- \_\_\_\_\_ Academic work to include writing reports and essays
- \_\_\_\_\_ Wearing protective clothing, including air packs, weighing 58 pounds
- \_\_\_\_\_ Heavy lifting of up to 145 pounds
- \_\_\_\_\_ Restricted space activities
- \_\_\_\_\_ Crawling
- \_\_\_\_\_ Lifting/moving extension ladders
- \_\_\_\_\_ Lifting/moving people/dummies
- \_\_\_\_\_ Raise and climb ladders and work at heights of up to 100 feet
- \_\_\_\_\_ Drag fire hose(s) up to several hundred feet
- \_\_\_\_\_ Carry 55-pound hose packs or equipment up and down stairs
- \_\_\_\_\_ Carry sections of 5" hose weighing up to 60 pounds
- \_\_\_\_\_ Ascend and descend numerous flights of stairs
- \_\_\_\_\_ The use of tools, including power tools, and equipment used in fire fighting
- \_\_\_\_\_ Hold nozzles and direct fog or water streams with a maximum of 100 lbs. of nozzle pressure
- \_\_\_\_\_ Use of chemical extinguishers
- \_\_\_\_\_ Ventilate simulated structures with hand-tools via an elevated roof prop and/or training facilities
- \_\_\_\_\_ Strenuous physical activity to include push-ups, pull-ups, sit-ups, running, stair climbing, and manipulative firefighter skill courses
- \_\_\_\_\_ Perform household/station details, i.e., cleaning toilets, sweeping/vacuuming and mopping floors, cleaning kitchen, trash pick-up, minor landscaping

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND SIGN IT FREELY AND VOLUNTARILY.**

**FOR PARENTS/GUARDIANS OF MINOR VOLUNTEERS (under age 18):** This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to this **Release and Waiver of Liability** as provided above for myself, my minor child/protected person, my heirs, assigns, and next of kin, I agree to this Release of Liability and Assumption of Risk on behalf of my minor child/protected person.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

State of Nevada )  
                          ) ss.:  
County of Clark )

The foregoing Waiver of Liability was acknowledged before me on  
\_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_

\_\_\_\_\_  
(Signature of notarial officer)

My commission expires: \_\_\_\_\_

**FOR VOLUNTEERS WHO ARE AT LEAST 18 YEARS OF AGE:** I do consent and agree to this Release and Waiver of Liability as provided above for myself, my heirs, assigns, and next of kin.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ AGE: \_\_\_\_\_

State of Nevada )  
                          ) ss.:  
County of Clark )

The foregoing Waiver of Liability was acknowledged before me on  
\_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_

\_\_\_\_\_  
(Signature of notarial officer)

My commission expires: \_\_\_\_\_