



HYDE COUNTY

Emergency Services

RIDE-ALONG APPLICATION

Please complete and submit this application along with the "Release/Indemnity and Privacy Agreement" to the Hyde County Emergency Services Department, 30 Oyster Creek Road, Swan Quarter, North Carolina 27885. You may contact the Hyde County Emergency Services Department as 252-926-4191 prior to the requested ride-along date to determine approval.

This program is voluntary and conducted in the interest of operational assessment. The Hyde County Emergency Services Department reserves the right to limit or exclude any person from participation in the program when it is deemed that the person's participation would be in the best interest of the department, any its members, or the public; or when it might reasonably be construed that a conflict of interest may exist or come to exist between the applicant and the department or its mission.

Full Name: _____ Date of Birth: _____

Home Address: _____

Place of Employment/School: _____

Home or Cell Number: _____ Work Phone Number: _____

1. Give reason for your request to ride: _____

2. Have you previously participated in a ride-along with HCESD? Yes No

3. Have you ever been arrested? Yes No If yes, list offense, location and date:

4. How did you become aware of this program? _____

5. In the event of an emergency, the following person should be contacted:

Name: _____ Phone: _____ Relation: _____

I affirm that the information provided in this application is true and correct to the best of my knowledge.

Signature: _____ Date: _____

<p>Distribution: Original – HCESD Director Copy – EMS Operations & Training Division Chiefs Copy - Participant</p>
