



Turlock Fire Department Smoke Detector Program Request Form

The Turlock Fire Department has developed a smoke detector program to help protect the citizens of Turlock and their loved ones from a devastating fire by installing and maintaining their smoke detectors. The program is designed for low-income families, the physically impaired and the senior members in our community. As Fire Fighters, we are very concerned because most people die from smoke and toxic gases rather than the fire itself. Many never even wake up. Most fire deaths could have been prevented if people only took the time to replace a battery or install a smoke detector. The plan is to protect yourself and your family by installing a smoke detector in your home to wake you up when a fire starts. Along with maintaining your detector, you should develop and practice an escape plan to enable you to get out safely in the event of a fire. You should also make it a practice to test your detector monthly and replace your batteries twice a year.

Please fill out the following information. Upon completion, return this form to Turlock Fire Department, located at 244 North Broadway.

Name _____ **Date:** _____

Address _____
Number Street City Zip

Date of Birth (must be over the age of 18) _____

Home Phone _____ **Cell or Work Phone** _____

How did you hear about our program? _____

Request (Check all that apply):

Smoke Detector Installation: ____ **Battery Installation:** ____ **Smoke Detector Test** ____

Department Use Only

Engine Company: _____ Time Spent: _____

of Batteries Installed/Replaced: _____ # of Smoke Detectors Installed/Replaced: _____

Manufacturer: _____

Model Name: _____

Turlock Fire Department
Smoke Detector Program
Statement of Informed Consent
WAIVER, RELEASE, AND ASSUMPTION OF RISK

Last Name	First	Middle
Which Category of need do you represent:		
<input type="checkbox"/> Low Income <input type="checkbox"/> Physically Impaired <input type="checkbox"/> Senior Citizen		

I, _____, hereby agree to participate in the City of Turlock's Smoke Detector Program on _____, 2015. I have been informed and understand the purpose of this program.

In consideration of the acceptance of my application for entry into the above event, I hereby waive, release and discharge any and all claims for damages for death, personal injury or property damage which I may have, or which hereafter accrue to me, against the entity as a result of my participation in the event. This release is intended to discharge the entity, its officers, officials, employees, and any other involved municipalities or public agencies from and against any and all liability arising out of or connected in any way with my participation in the event, even though that liability may arise out of the negligence or carelessness on the part of persons or entities mentioned above. I further understand that accidents and injuries can arise out of the event; knowing the risks, nevertheless, I hereby agree to assume those risks and to release and to hold harmless all of the persons or agencies mentioned above who (through negligence or carelessness) might otherwise be liable to me (or my heirs or assigns) for damages. It is further understood and agreed that this waiver, release, and assumption of risk is to be binding on my heirs and assigns.

I hereby expressly waive and release all claims and causes of action I now have or in the future may have against the City of Turlock, a municipal corporation (hereinafter the "Released Party") based on, or related directly or indirectly to, my voluntary participation in the City of Turlock's Smoke Detector Program conducted on _____, 2015. To the extent of such waiver and release, I expressly waive my rights, if any, under California Civil Code Section 1542 which provides: "A GENERAL RELEASE DOES NOT EXTEND TO CLAIMS WHICH THE CREDITOR DOES NOT KNOW OR SUSPECT TO EXIST IN HIS OR HER FAVOR AT THE TIME OF EXECUTING THE RELEASE, WHICH IF KNOWN BY HIM OR HER MUST HAVE MATERIALLY AFFECTED HIS OR HER SETTLEMENT WITH THE DEBTOR."

Date: _____, 2015

 Print name of Participant

 Signature

 Captain's Name Printed

 Captain's Signature