Danville Life Saving Crew

EMS Event Standby Agreement

_____ has requested EMS standby coverage from the DLSC for the following event:

Name of Event:	
Type and Nature of Event	
Date/Time of Event (Start):	
(Finish):	
Event Location	
Requestors Name:	
Requestors Phone:	

Type of Service		Dedicated		Non-Dedicated*

Non-Dedicated coverage means a staffed EMS unit will be repositioned to the above event(s) during the indicated time(s) as available. This unit shall remain "in-service" to answer all emergency calls within DLSC's coverage area during the listed times. This includes any requests for medical assistance at this event. Continuous coverage at this event is not guaranteed for any portion of the event. Additional EMS units will not be rotated to the event if and when the assigned unit is called away.

Personnel		Vehicles Requested		Equipment/Supplies
#EMTs:		# BLS Ambulances:		
#Medics:		# ALS Ambulances:		
		Other Vehicles:		

The Requestor understands it is responsible for complying with any applicable rule, ordinance, or statute requiring the presence of EMS at a special event or community program. If the Requestor wishes to have a Dedicated EMS standby for the event, arrangements must be made at least thirty (30) days before the start of the event.

If selecting Non-Dedicated EMS standby services to the sponsoring agency, the undersigned, Sponsoring Agency, hereby acknowledges the meaning of Non-Dedicated service as set forth above, understands and agrees that continuous coverage may not be available at the event and agrees to hold EMS Organization, its officers, directors, members and employees harmless from any and all suits, actions, injuries, loss or damages, of any kind, arising out of any act, occurrence or omission resulting from Sponsoring Agency's or EMS Organization's failure to provide Dedicated EMS standby services during the event.

_____   _____
Printed Name of Requestor Representative   Title

                                                                                     _____
                                                                                     Date

After completing this form, please email it to bfox@dlsc.org and kwhitt@dlsc.org.