



Joliet 9-1-1 Communication Center

Sit-Along/Observation Waiver

In exchange for the opportunity to observe and participate in the authorized operations of the City of Joliet 9-1-1 Communication Center, where as activity may introduce certain criminal and medical information which is protected from public disclosure by applicable State and Federal Statutes, this waiver must be signed and returned to the Communications Director.

I acknowledge that by my participation in a Sit-Along with a Joliet 9-1-1 Center Public Safety Dispatcher, I may see, hear, or otherwise learn of certain criminal and medical information which is protected from public disclosure by applicable State and Federal Statues.

I understand that I may not disclose to anyone including, but not limited to, my family, friends, and co-workers any information pertaining to criminal activities, criminal records, incident addresses, CAD event screens, 9-1-1 call information, premise history, telephone records, medical information and the location of a medical response that I may see, hear or otherwise learn of while participating in a 9-1-1 Dispatch Center Sit-Along.

I further understand that should I disclose such information I could be subject to prosecution for violation of State and/or Federal Statues and/or subject to civil suit by persons affected by my disclosure.

I further agree to hold harmless, defend and indemnify the agency, its employees, officials, officers, and agents from any and all claims of liability for injury or damage, emotional or physical, suffered by third parties or entities arising out of my disclosure of confidential information.

NOTE: Persons 16 years of age and older, but less than 18 years of age also require the signature of their parent or legal guardian before a Sit-Along can be completed.

PRINTED NAME

SIGNATURE

DATE

PARENT OR LEGAL GUARDIAN SIGNATURE IF REQUIRED