Hamilton County Emergency Communications District
Minor Sit-Along Confidentiality Agreement

The Hamilton County Emergency Communications District (the District) provides the opportunity for members of the public to participate in "sit-alongs" in the Emergency Communications (9-1-1) Center. Sit-alongs allow individuals other than Public Safety staff to listen in on both incoming 9-1-1 calls and emergency radio traffic with first responders. The District has deemed sit-alongs to be beneficial for the purposes of spreading awareness of the District's operations and exposing individuals to potential careers in 9-1-1/Emergency Communications. However, due to the nature of emergency calls and radio traffic, sit-alongs may be upsetting for certain individuals, particularly minors.

I, the parent or legal guardian of the below named child, understand that, by participating in a sit-along at the Hamilton County Emergency Communications District, there may be instances in which my child may be exposed to/hear sensitive situations, including but not limited to profanity, irate callers, emotional victims, violent crimes, medical emergencies, and first responders handling critical circumstances.

Furthermore, during the sit-along, my child may see or hear confidential information, such as a caller's name and address, a patient's medical information, or a subject's criminal history. I will explain to my child the importance of confidentiality to protect the privacy of all individuals involved.

Finally, cellular phones or any electronic devices capable of recording audio, video, or imagery of any kind are not permitted during your child's sit-along. I will discuss this with my child to ensure compliance. If the sit-along is provided as part of a tour or larger program, District staff will explain to my child on which parts of the tour phones/electronic devices are permitted and on which parts they are not.

Minor's Name (Print): _____

Minor's Signature: _____

Parent/Guardian's Name (Print): _____

Parent/Guardian's Signature: _____

Parent/Guardian's Phone Number: _____

Date Signed: _____