



Village of Hampshire

234 S. State Street, Hampshire, IL 60140
Phone: 847-683-2181 • www.hampshireil.org

SNOW PLOW RIDE-ALONG PROGRAM

The Village of Hampshire, Department of Public Works is offering the opportunity for residents to ride- along with one of our snow plows during a winter storm. There is no fee for the ride-along and all participants will need to be at least 18 years old and capable of climbing into the large truck.

How it works: Interested participants can fill out an application and waiver with times that they are available to participate in the ride-along. Applications are available on the Village's web site on the Public Works page.

Each truck can accommodate one passenger, and rider participation is at the discretion of the Supervisor of Streets.

One or two days before a winter storm, Village staff will confirm your availability for the anticipated storm and schedule a time for your ride-along. Participants will arrive at the Street Garage on Klick Street, where they will be given an overview of the Village's snow plowing operations. Following the orientation, the participants will meet the plow driver and climb into the truck.

What to bring: Participants should dress in comfortable clothes and stable footwear, boots are preferred. Layered clothing is recommended, as the cab of the plow trucks are kept very warm to minimize the ice build-up on the windshields.

**Village of Hampshire
Snow Plow Ride-Along Program**

APPLICATION AND WIAVER OF LIABILITY

Applicant's Name: _____

Phone: _____ Date of Birth: _____

Address: _____

No. Street City State Zip

Availability

(circle times that the applicant is available to participate)

Weekdays

Day Time 8:00 am to 4:00 pm
Early Evening 4:00 pm to 8:00 pm
Evenings 8:00 pm to 12:00 am
Mornings: 12:00 am to 8:00 am

Weekends

Day Time 8:00 am to 4:00 pm
Early Evening 4:00 pm to 8:00 pm
Evenings 8:00 pm to 12:00 am
Mornings: 12:00 am to 8:00 am

Eligibility for participation in the Village of Hampshire's Snow Plow Ride-Along Program (Program) shall be determined solely by the Supervisor of Streets (Supervisor) who may in his sole discretion and at his sole option deny participation in the Program to you for any reason. The decision of the Supervisor shall be final. When selected to participate, you will be notified by telephone at the telephone number you have provided hereinabove of the date and time that you will be required to appear to participate in the Program.

Do you have any medical or health issue(s) or condition(s) that may in any way affect the safe operation of the snow plow and/or the safety or the health and wellbeing of the snow plow's driver?

Circle: yes no

If yes, please describe:

If selected, you must appear at the Village of Hampshire's street garage on Klick Street, Hampshire, IL 60140 after receipt by telephone notice of participation in the Program. Failure to appear on assigned date and/or at the assigned time can result in denial of your participation in the Program. You may, only at the sole option of the Street Supervisor, be rescheduled for participation in the Program. After you have completely read and understand the following Safety Instructions and "Waiver" and in the event that you continue to desire to participate in the Program, please sign and date at the places provided herein below and return this application and WAIVER to the Village of Hampshire, 234 S. State Street, Hampshire, IL during regular business hours.

SAFETY RULES AND REGULATIONS

I acknowledge and agree to fully and completely comply with any and all safety rules and regulations of the Village of Hampshire Public Works Department Street Maintenance Division including but not necessarily limited to those set forth herein below:

1. Seatbelts shall be worn at all times while in the cab of the snow plow.
2. Any and all levers, buttons, switches or controls of any kind or nature shall not be touched or operated at any time by the passenger. The passenger may operate the seat belt and door handles for purposes of entering or leaving the cab of the snow plow only while the snow plow is at a complete stop. Exiting the cab is not permitted along the roadway except in an emergency.
3. At no time shall the passenger distract or impair the driver of the snow plow in the operation of the snow plow.
4. While entering or exiting the cab of the snow plow, the passenger shall use all available handles, grab bars, rails and steps.
5. The passenger shall at all times follow any safety instruction of the snow plow driver.

The Safety Rules and regulations are hereby acknowledged:

Date

Applicant's Signature

**PLEASE CAREFULLY READ THE ATTACHED WAIVER
WAIVER OF LIABILITY**

I, _____ (*Print Applicant's Name*), know, understand and acknowledge the scope, nature, and extent of the risks involved in my participation in the Village of Hampshire's Snow Plow Ride-Along Program.

I understand that these risks include but are not necessarily limited to the risk to me of damage to property, personal injury and/or death. I voluntarily and freely choose to assume all such risks and any other risks not described herein or otherwise contemplated hereby.

Being advised of and fully understanding the risks to which I may be subject and exposed to while participating in the Village of Hampshire's Snow Plow Ride Along Program, I hereby assume any and all risk and hereby waive, on behalf of myself, my agents, heirs, successors and assigns, any and all causes of action, claims or demands for damage to property, injuries to person or death arising from my participation in the Village of Hampshire's Snow Plow Ride- Along Program. I further hereby release and forever discharge the Village of Hampshire, its, officers, employees, agents, servants, officials, contractors, subcontractors, consultants, successors, heirs and assigns from any and all liability for any and all claims made by me, on my behalf, or on behalf of my estate as a result of my participation in the Village of Hampshire's Snow Plow Ride Along Program.

I have read the foregoing and fully acknowledge, completely understand and agree with the terms thereof.

Applicant's Signature

Date

Emergency Contact Information:

Contact Name

Relationship

Phone Number

Alternate Phone Number

Return completed applications to:
Village of Hampshire, 234 S. State Street, Hampshire, IL 60140