



**Coffee County
Emergency Medical Service
1110 Madison Street
Manchester, Tennessee 37355**



Director (931) 723-5137
Operational Assistant (931) 723-3412

Adm. Assistant (931) 723-2648
Fax (931) 723-8242

RIDER RELEASE

I, _____, do hereby release Coffee County EMS personnel, Board of Authority, Coffee County, and the State of Tennessee, from any and all claims which could result in my injury while a passenger in a county operated vehicle.

Signed _____ Date _____

Witness _____ Date _____

Witness _____ Date _____