

San Jacinto County First Responders, Inc.  
PO Box 1023, Coldspring, Texas 77331  
[sjcfresponders@gmail.com](mailto:sjcfresponders@gmail.com)



## Documents Received

I, \_\_\_\_\_, have received a copy of the following:

- By-Laws of SJCFR
- Rules and Regulations
- SJCFR Protocol Manual

I will read and understand the above-mentioned documents and will abide by these rules and regulations. I understand that failure to do so can result in disciplinary actions and/or termination by the San Jacinto County First Responders, Inc. and/or Allegiance Mobile Health.

**Print Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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\* To be filled out by a SJC First Responder Officer \*

**Signature:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_