



# Lifesaving Medal Application

A proud tradition since it began in the U.S. in 1920, the AAA School Safety Patrol program equips Patrollers with the skills and resources needed to help children commute to and from school safely. More than 654,000 Patrollers in 34,500 U.S. schools dedicate their time to ensure pedestrians are safe. Patrollers have contributed to a major reduction in pedestrian fatalities and injuries.

## **The Lifesaving Medal**

The AAA School Safety Patrol Lifesaving Medal is the highest award given to a Patroller. Recipients are select Patrollers who, while on duty, have saved the life of a person in imminent danger.

AAA initiated the program to recognize Patrollers for heroic lifesaving acts. Since the Lifesaving Medal's inception in 1949, 428 boys and girls have received the award.

A panel of individual AAA clubs and representatives from the AAA National Office will select deserving medal recipients from the nominated candidates.

## **Recommendation Qualifications**

The Lifesaving Medal honors a member of any authorized AAA School Safety Patrol when there is conclusive proof that:

- The life of the person saved was in imminent danger.
- The act was performed while the Patroller was on authorized duty, going to or from a duty post, or while on duty as a Bus Patroller. (NOTE: If the Patroller's duty or location is different than recommended in the AAA School Safety Patrol Operations Manual, the documentation should include local instructions to this effect).
- No negligence on the part of the Patroller caused or contributed to the person rescued being placed in the situation where his or her life was endangered.
- The act occurred within the last year of applying for this award.

## Recommendation Procedures

There are no restrictions on who may recommend a Patroller for a Lifesaving Medal. Anyone who sees or has reliable information on a Patroller performing a lifesaving act may do so. The program Advisor is responsible for approving the initial recommendation and should investigate all circumstances surrounding the act. The recommendation process has four steps:

1. Complete the official Recommendation Form
2. Gather supporting material
3. Diagram the lifesaving incident
4. A high-resolution photo of the nominee and signed name and likeness release form (for use in winner announcements, if selected.)
5. All materials must be submitted via email: [Traffic.Safety@GoAAA.com](mailto:Traffic.Safety@GoAAA.com)

### **Important!**

The more detail you can provide in the application packet, the better. Please be sure all sections are filled out completely, and all supporting documentation is included with your submission.

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## 1 - Recommendation Form

The Recommendation Form is used to review the case. It must be filled out neatly, accurately and completely. The more detailed the information, the better.

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## 2 - Supporting Material

Supporting documentation must substantiate and clarify the act described on the Recommendation Form. When possible, include:

- Descriptive signed statement from the witness or witnesses
- Descriptive statements from:
  - The operator of the vehicle(s) involved in the incident
  - The person(s) rescued
  - The nominee
- Letter from the school principal, a teacher or the Patrol Advisor indicating:
  - Whether the Patroller was on duty at his or her specific station
  - Where other Patrollers on duty were stationed
  - What other Patrollers on duty were doing
- Photographs and/or video of the scene
- Police report(s) if the incident was investigated
- Media articles and pictures pertaining to the incident

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## 3 - Diagram

A clear, accurate diagram on an unlined sheet of paper at least 8½" x 11" in size must depict the circumstances surrounding the entire lifesaving sequence (see sample diagram on page 5). You may draw your own or use the blank diagram on page 7. Photos of the school zone, Patroller and other details also are helpful. When possible, the diagram should:

- Use solid lines to outline the roadway, sidewalks and nearby vicinity at the scene of the incident
- Indicate obstructions, such as parked cars, trucks, trees or buildings, that blocked the views of the Patroller, vehicle driver or pedestrian
- Mark the locations of the person(s) and vehicle(s) involved at the moment the Patroller realized the danger
- Use solid lines to show the paths of the endangered person(s) and vehicle(s) before the Patroller acted
- Use dotted lines to show the paths of the Patroller, rescued person(s) and vehicle(s) after the Patroller initiated action

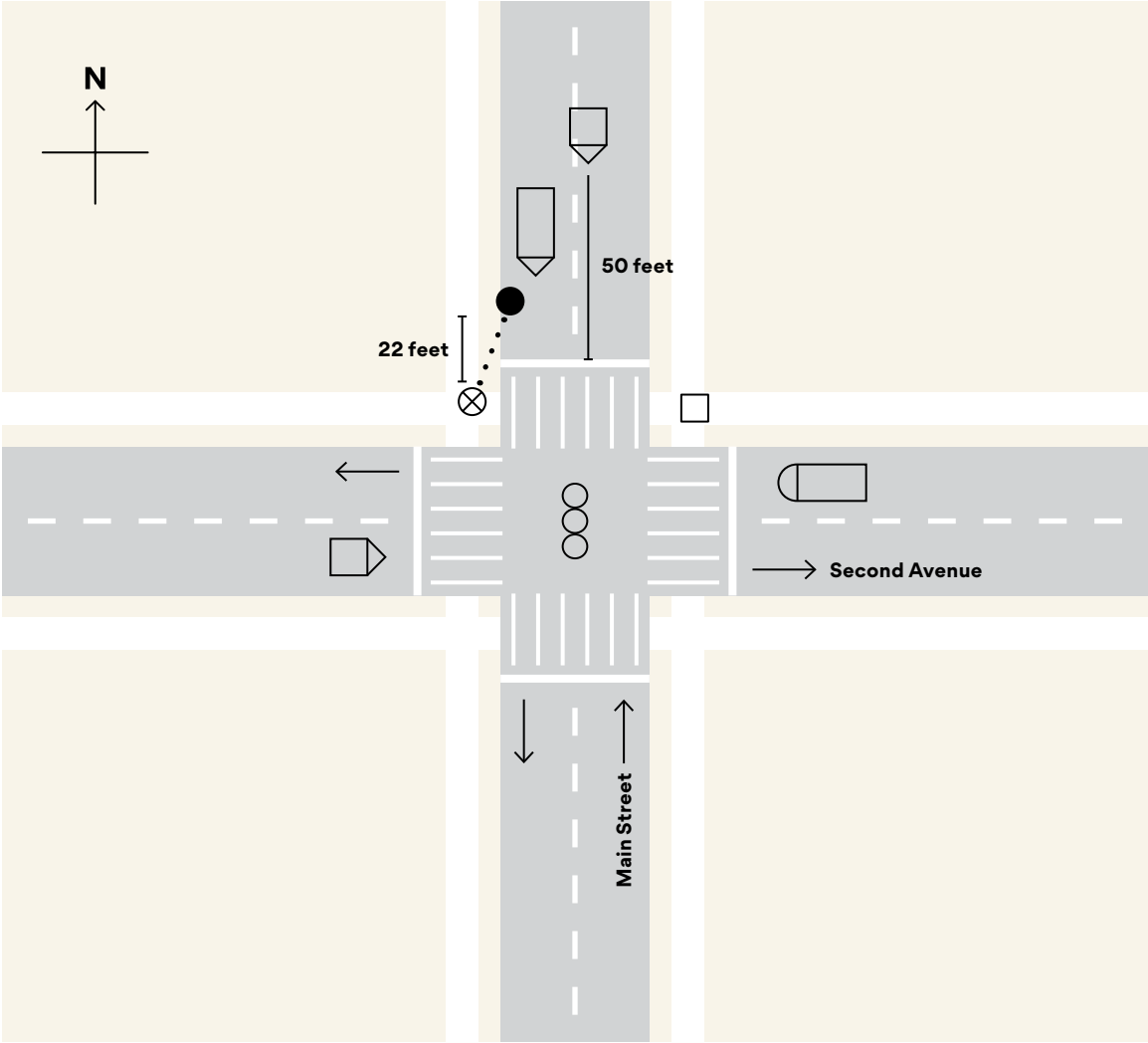
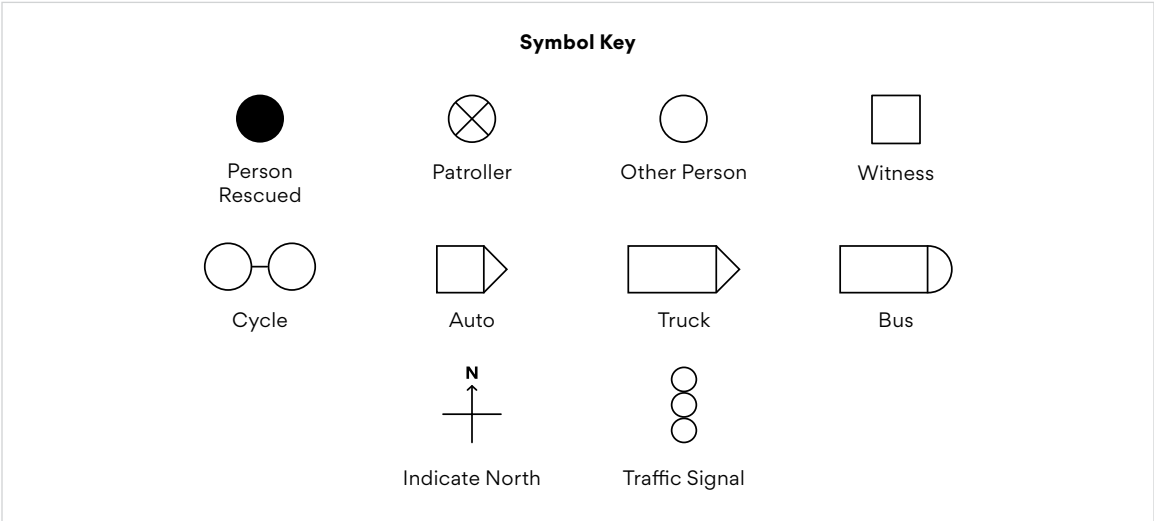
- Indicate the direction and estimated speed of the vehicle(s) involved
- Indicate the location of traffic signs, signals, crosswalks, police officers, witnesses and others involved
- Show relevant distances, street widths and roadway directions (i.e., one- or two-way)

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## **4 - Submitting Recommendations**

- Lifesaving acts performed during the current school year are eligible for consideration.
- Recommendations should be submitted as soon as possible so that necessary documentation can be obtained while the information is still fresh.
- If the lifesaving incident takes place after the submission deadline or close enough to it that documentation cannot be compiled in time, the case will be considered for the following year. If a delay occurs due to another cause, please explain fully.

## Sample Diagram



# Lifesaving Medal Application

## Recommendation Form

\* Names will appear on awards as they are listed below. Please verify spellings of names and school.

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### School Information

School Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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### Persons Involved (Patroller)

Patroller Name (first, middle, last): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Length of Service (months): \_\_\_\_\_ Type of Duty:  Regular  Substitute

Parent/Guardian(s) Name(s): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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## Persons Involved (Person Rescued)

Name (first, middle, last): \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Injuries: \_\_\_\_\_

Parent/Guardian(s) Name(s): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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## Date and Location

Date of Action: \_\_\_\_\_ Time: \_\_\_\_\_

Intersection (name of cross streets): \_\_\_\_\_ and \_\_\_\_\_

Not at Intersection (name of nearest street): \_\_\_\_\_

# of Feet from Nearest Street: \_\_\_\_\_

Direction:  North  South  East  West

Posted Speed Limit: \_\_\_\_\_ Volume of Traffic:  Heavy  Moderate  Light

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## Vehicles Involved

Driver's Name (first, middle, last): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of Vehicle: \_\_\_\_\_ Condition of Vehicle: \_\_\_\_\_

Damage to Other Vehicles or Property: \_\_\_\_\_

Action of Driver: \_\_\_\_\_

Violations (exceeding speed limit, etc.): \_\_\_\_\_

Did the driver issue a summons?  Yes  No

Valid License:  Yes  No

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## Conditions

Weather:

Clear  Cloudy  Raining  Snowing  Fog Temperature: \_\_\_\_\_ °F

Road Conditions:

Dry  Wet  Snow  Ice  Slick (mud/oil)  Other: \_\_\_\_\_

Road Surface:

Concrete  Asphalt  Brick  Gravel  Unpaved  Other: \_\_\_\_\_

Locality (check one, indicating that 50% or more of area along street for 300 ft. was):

Industrial  Shopping/Business  School Playground  Residential

Other: \_\_\_\_\_



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## Description of Occurrence

Rescued person was:

On the way to school    Going home    Other: \_\_\_\_\_

Rescued person used route:

Always    Frequently    Rarely

Rescued person's clothing:

Light    Dark    Other: \_\_\_\_\_

Traffic Lanes:

Unmarked    Marked    Separated    Other: \_\_\_\_\_

Traffic Controls:

None    Signs    Traffic Signs    Pedestrian Control Devices    Police Officer  
 Adult Crossing Guard

*Please consider carefully when estimating speeds and distances. Attach diagram to illustrate this information.*

The moment the Patroller realized a person was in danger, what was:

a) The location/distance of the vehicle from the Patroller on duty? \_\_\_\_\_

b) The location/distance of the vehicle from the person in danger? \_\_\_\_\_

c) The direction the vehicle was traveling? \_\_\_\_\_

d) The estimated speed of the vehicle? \_\_\_\_\_

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## Description of Occurrence, cont'd.

Action(s) of person in danger:

Action(s) of Patroller:

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## Recommended By

Name (first, middle, last):

Occupation:

Signature:

If recommender did not see the act, what is the basis for the recommendation?

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## Witnesses

We, the undersigned, witnessed the reported lifesaving act, find the facts to be true and correct, and submit our own description of what happened:

**Witness 1 Name** (first, middle, last): \_\_\_\_\_

Occupation: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Witness 2 Name** (first, middle, last): \_\_\_\_\_

Occupation: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Witness 3 Name** (first, middle, last): \_\_\_\_\_

Occupation: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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## Reviewer

I have investigated this recommendation, find the reported facts to be correct, and endorse the recommendation for a Lifesaving Medal award.

**AAA School Safety Patrol Advisor** Signature: \_\_\_\_\_

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

## Attest Nomination

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

City: \_\_\_\_\_

State: \_\_\_\_\_

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

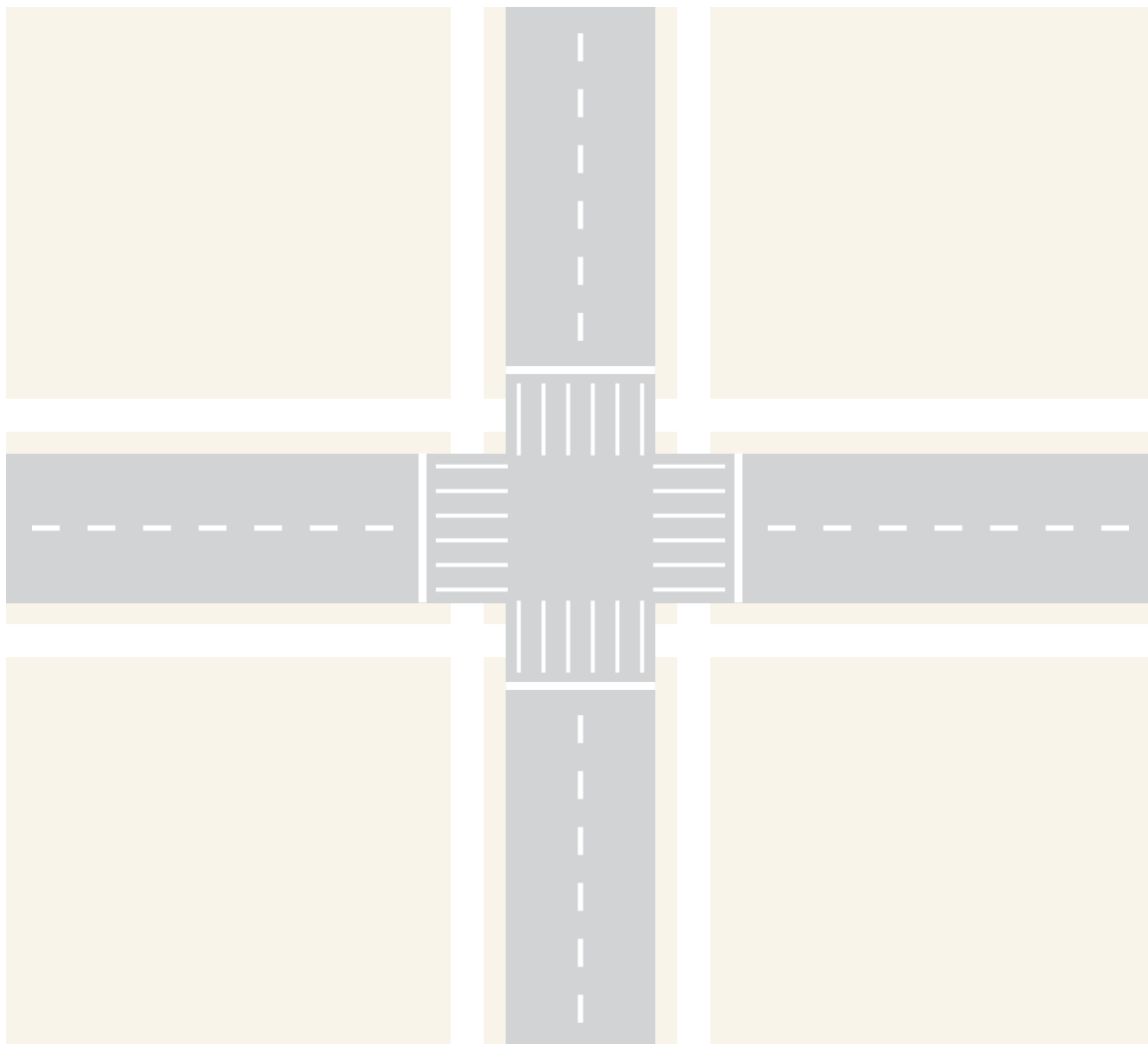
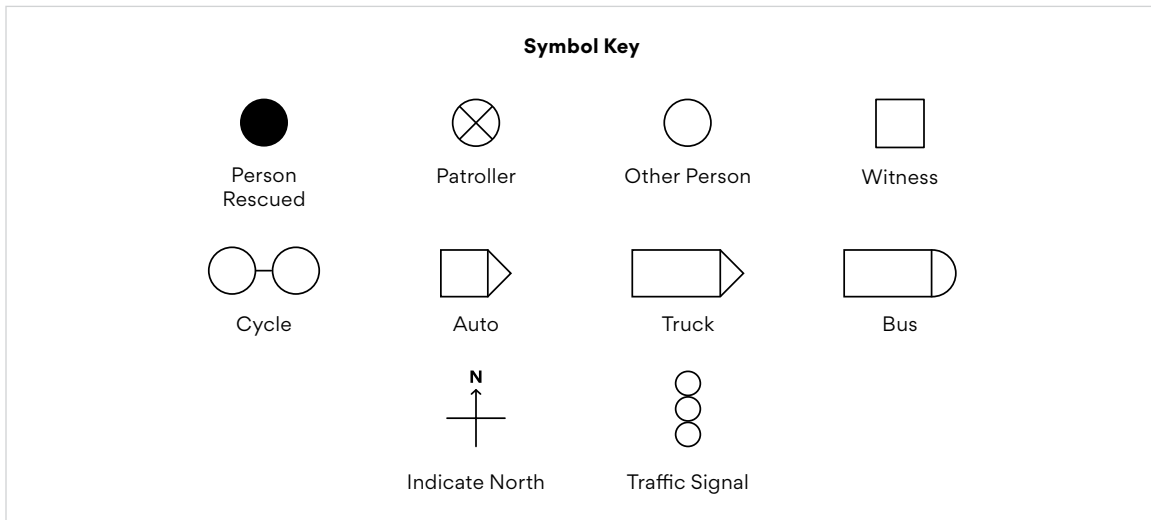
**Police Safety Officer** Signature: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

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

## Diagram





## Name and Likeness Release

AAA of Northern California, Nevada & Utah (AAA) has requested to use my name, voice, photograph, and likeness that may be captured in photos, video recordings, and audio recordings and any quotations or statements made by me (collectively, the **“Materials”**) relating to the interview, photo and/or video sessions conducted by AAA.

I hereby voluntarily and irrevocably authorize AAA and its affiliates, assignees, and licensees to reproduce, distribute, display, perform, prepare derivative works of, modify, and use the Materials, in any medium now known or later developed, for the purpose of advertising and promoting AAA and its products and services, in consideration of AAA's promise to limit its use of the Materials as described herein.

I understand and acknowledge that I will not be paid any compensation in connection with the Materials. I hereby waive any right that I may have to inspect and/or approve the Materials.

I certify that any quotations and statements made by me as set forth above (the **“Statements”**) represent my current honest opinions, findings, beliefs, or experiences and that the Statements were made without any prior promise of payment or other benefit, and without any expectation of payment or benefit in return for giving my views. To the extent that I suggest that I use any of AAA's products or services, I do in fact use them. To the extent that I express a preference over other similar products/services, I do in fact have that preference. (I also understand and agree that the Statements may be modified in any manner that does not materially alter their original meaning.) I agree to promptly notify AAA of any change in my expressed views.

I voluntarily release AAA from any and all claims, known or unknown, in connection with the use of the Materials as described above, which I have consented to and authorized by signing this release.

In giving this release, which includes claims that may be unknown to me at present, I acknowledge that I have read and understand Section 1542 of the California Civil Code, which reads as follows: **“A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor.”** I expressly waive and relinquish all rights and benefits under this section and any law of any jurisdiction of similar effect with respect to my release of any unknown or unsuspected claims I may have against AAA.

I represent that I am over the age of eighteen, that I have the power and authority to sign this release, that I have no preexisting obligation that may restrict or limit my ability to sign this release, and that this release will be binding on my heirs, representatives and assigns.

This release is governed by the laws of the State of California without giving effect to any conflicts of laws principles that may require the application of the laws of a different jurisdiction. I hereby waive any and all equitable and injunctive rights and acknowledge that my sole remedy for a breach of this release or otherwise shall be an action at law for damages. This release constitutes the entire agreement between the parties with respect to the Materials.

Signature:

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Print Name:

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Date:

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Address:

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**If under 18 years old, a parent/guardian signature is required:**

Parent/Guardian Signature:

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Parent/Guardian Print Name:

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