

FIRST EXTENSION OF INDIAN RIVER COUNTY EMERGENCY SERVICES DISTRICT AFFILIATION AGREEMENT WITH TREASURE COAST MEDICAL INSTITUTE, INC.

This First Extension of Indian River County Emergency Services District Affiliation Agreement with Treasure Coast Medical Institute, Inc. (First Extension) is entered into this 14 day of August, 2018, by and between **INDIAN RIVER COUNTY EMERGENCY SERVICES DISTRICT**, a dependent special district, whose mailing address is 4225 43rd Avenue, Vero Beach, FL 32967, hereinafter **COUNTY** and **TREASURE COAST MEDICAL INSTITUTE, INC.**, a Florida corporation, whose location and mailing address is 805 Virginia Ave., #28, Fort Pierce, FL 34982, hereinafter **TCMI**.

WHEREAS, the **COUNTY** and **TCMI** entered into an Indian River County Emergency Services District Affiliation Agreement with Treasure Coast Medical Institute, Inc. (Agreement) effective September 15, 2016, for EMT and paramedic students who attend **TCMI** to obtain "on the job training" by conducting ride-a-longs with County Emergency Services District personnel; and

WHEREAS, the parties have found the Agreement to be mutually beneficial; and

WHEREAS, the Agreement provides for three one year periods; and

WHEREAS, the **COUNTY** and **MCA** desire to renew the Agreement for an additional one year period.

NOW THEREFORE, the parties do agree as follows:

1. The above recitations are true and correct and incorporated herein by reference in this Agreement.
2. The Agreement effective September 15, 2016, is hereby extended until September 14, 2019.
3. The remaining terms of the Agreement remain unchanged and in full force and effect.

IN WITNESS WHEREOF the COUNTY and TCMI has caused these presents to be executed in their names, the day and year first above written.

TREASURE COAST MEDICAL INSTITUTE, INC.

**INDIAN RIVER COUNTY
EMERGENCY SERVICES DISTRICT**

By: 
Kevin Franklin, President

By: _____
Peter D. O'Bryan, Chairman

Date: 8/02/2018

Date Approved: _____

ATTEST: Jeffrey R. Smith,
Clerk of Court and Comptroller

By: _____
Deputy Clerk

Approved:

Jason E. Brown, County Administrator

Approved as to Form and Legal Sufficiency:

William K. DeBaal, Deputy County Attorney