EPPING POLICE DEPARTMENT PRE-EMPLOYMENT PHYSICAL AGILITY TEST FOR POLICE OFFICER Legal Waiver Form

I, _____, (Print Name) execute this Waiver and Release in favor of the Town of Epping, NH, and its departments, officers, employees, agents, assigns and insurers (herein called "the Town").

I, the undersigned, hereby request permission to take the Physical Agility Test as part of my application for employment as a Police Officer for the Epping Police Department. I am fully aware of the risks and the dangers involved, and that unanticipated and unexpected dangers may arise during such activities and I agree to assume all risks of injury to my person and property that may be sustained in connection with preparing for and taking said test.

In consideration for being permitted to take said test, I, myself, my heirs, legal representatives and assigns, release and hold harmless the Town of Epping from all claims, demands and causes of action for all damage, bodily injury or liability of any kind that may occur to me or arise out of this activity. I hereby agree not to bring suit or other legal action, either State or Federal, based upon any claims against the Town arising directly or indirectly from my participation in the test.

By signing below, I acknowledge that I have read and fully understand the terms of this Release and that I have received and read a copy of the testing requirements. My agreement to this release and attendance, participation and preparation for this test is voluntary.

Signature:	Date:
Printed Name:	
Address:	
Notary:	
Commission Expiration:	

[Notary Seal]