

EAST OLYMPIA FIRE DISTRICT 6

**WAIVER AND RELEASE
PHYSICAL AGILITY TESTING**

I, the undersigned, acknowledge that I have willingly chosen to participate in the East Olympia Fire District 6 physical fitness test for Firefighter Candidates. Taking this test does not guarantee employment or the prospect of future employment. Any time expended on testing is non-compensable regardless of my current or future employment status with the East Olympia Fire District 6.

I have received advance notification of the tests which will be administered. I have had the opportunity to consult my personal physician. If I have not done so, I understand that proceeding to do so poses inherent risks including the potential for serious injury or death.

On behalf of my estate, myself or anyone claiming any interest on behalf of myself or estate, I hereby release East Olympia Fire District 6 and its officials, employees, and agents from any liability for injuries or death which may occur as a result of my participation in the Firefighter physical agility tests.

I sign this waiver and release willingly and of my own volition without coercion of any kind. I understand that by signing this form I give up all rights whatsoever to recover damages from East Olympia Fire District 6 for injury or death arising out of the physical agility testing

Name (print)

Signature

Date

Witness

Date