

PHYSICAL PERFORMANCE ASSESSMENT WAIVER and RELEASE

Candidate	
	(Print Name)
necessary for me to deconsideration of the sexaminations, waive and all claims whatso sustain as a result of physical condition the nature of these tests. hereby release the Toagents from any and	(print your name), having filed an application with the ment and having been advised that as part of the testing procedure it will be monstrate my physical skills and abilities in a series of tests, do hereby, and in nithfield Fire Department having permitted me to participate in such and release the Town of Smithfield and the Smithfield Fire Department from any ver which might accrue or arise as a result of any injury or damage that I may articipating in such examinations; I further state that I am not aware of any could be aggravated, worsened or otherwise adversely affected by the strenuous make this release for myself, my heirs, executors and administrators and do on of Smithfield and the Smithfield Fire Department and all its employees or I liability for damages incurring as a result of these tests.
	ing statement in the space provided: "I certify that I have read the foregoing d understand its provisions".
Data	Candidate's Signature