



**Kevin DiNapoli, Chief of Police**  
Wenham Police Department  
1 Friend Court  
Wenham, MA 01984

### **WAIVER & RELEASE OF LIABILITY PHYSICAL AGILITY TESTING**

I, the undersigned, acknowledge that I have willingly chosen to participate in the Wenham Police Department's physical fitness test for police officer candidates.

I hereby release the Town of Wenham, the Wenham Police Department and its officials, employees, and agents from any liability for injuries or death which may occur as a result of my participation in the police officer physical agility testing. It is my responsibility to understand the testing requirements and I assume all liability for my participation. I understand that I have had the opportunity for an independent medical examination by a doctor of my own choosing and own expense, prior to agreeing to this testing, and have chosen to forego such opportunity - or have attached a medical record to this waiver indicating I have had such examination and I am free to participate.

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 the Town of Burlington for injury or death arising out of the physical agility testing.

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

(This form is NOT required to be notarized but must be witnessed by a person 18 years of age or older)