Certificate of Release and Waiver

Desiring to become a police officer with the West Windsor Township Police Department, I declare and represent that I am in good health, that I have reviewed the Physical Fitness test that I am about to take and I understand the nature of this Physical Testing process.

In consideration of being given permission to take the Physical Fitness Test, I ASSUME THE RISK of any loss, damage, expense, loss of earning, personal injury and death, consequential damage and property damage arising out of or related to any accident, illness, or disability (hereafter referred to as "event") which results from or occurs in connection with my taking of the Physical Fitness Test. I assume all such risks whether the effects of such events occurs in, on, or about, the place where the test is given; whether the effects of such event are felt during the test or afterwards, so long as they are medically related to the test and to my presence in, on, or about the place where the test is given; and whether such events results from or arises out of the conditions, maintenance, repair, alteration or use of that place or any equipment of fixtures contained in, on, or about that place.

I understand that during the test that injury, illness, and death can occur. Injuries to the muscle and skeletal system, cardiovascular system, as well as other bodily injuries can result from the test.

I also agree to release the Township of West Windsor, the West Windsor Plainsboro Board of Education, its employees, agents, and servants of all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may result, directly or indirectly from my participation in said test and my presence for the purpose in, on, or about the place where the test is given. This release is binding upon my heirs, assigns, next of kin, executors, and administrators.

I HAVE READ THIS RELEASE IN FULL. I UNDERSTAND THAT, BY SIGNING IT, I AM WAIVING AND RELEASING MY RIGHTS WHICH I COULD EXERCISE BUT FOR MY SIGNING OF THIS RELEASE VOLUNTARILY AND WITHOUT COERION OR DURESS.

Witness	Print Name:	
	Sign:	