

**City of Keller Fire
Department
Physical Fitness Assessment
Claims Release**

I, _____, for and in consideration of the opportunity to be considered for employment with the City of Keller Fire Department, do hereby release, indemnify, and agree to hold harmless the City of Keller Fire Department, their employees, agents and assigns from and against any and all claims, liability, and causes of action which may have accrued, or in the future accrue, to me as a result of my taking of a test to determine my physical fitness. I understand that the physical fitness assessment is required as a part of the application procedure for consideration for employment to the City of Keller Fire Department. I acknowledge that during the taking of said test, my physical strength, ability, and condition will be measured and in conjunction therewith, I will be required to exert myself physically, and that such exertion is only intended to measure my physical ability and fitness to determine whether or not I meet the job-related requirements regarding physical fitness to be considered for employment. I voluntarily agree to participate in the said test, and realizing the possible consequences of said test, agree to waive and abandon my claim, cause of action or liability that I may presently have or which I may attain in the future as a result of or with regard to the said test.

Printed Name

Signature

Date

Sworn and subscribed before me, a Notary Public, in the county of _____ and for the State of _____ on this, the day of _____, 20__.

Signature of Notary

My Commission Expires

Printed Name of Notary

Notary Seal