

**ANNE ARUNDEL COUNTY PRE-EMPLOYMENT
PHYSICAL AGILITY TEST FOR
ENTRY- LEVEL DEPUTY SHERIFF
(NON-COUNTY EMPLOYEES)**

Legal Waiver Form

I, _____, (Print Name) execute this Waiver and Release in favor of Anne Arundel County, Maryland, and its departments, officers, employees, agents, assigns and insurers (herein called "the County").

I, the undersigned, hereby request permission to take the physical agility test as a part of my application for employment as an Entry-Level Deputy Sheriff for Anne Arundel County, Maryland. I am fully aware of the risks and dangers involved, and that unanticipated and unexpected dangers may arise during such activities and I agree to assume all risks of injury to my person and property that may be sustained in connection with preparing for and taking said test.

In consideration for being permitted to take this test, I myself, my heirs, legal representatives and assigns, release and hold harmless to the county from all claims, demands and causes of action for all damage, bodily or liability of any kind that might occur to me or arise out of this activity. I hereby agree not to bring suit or other legal action, either State or Federal, based upon any claims against the County arising directly or indirectly from my participation in the test.

By signing below, I acknowledge that I have read and fully understand the terms of this Release and that I have received and read a copy of the testing protocol. My agreement to this release and attendance, participation and preparation for this test is voluntary.

Signature: _____ Witness*: _____

Printed Name: _____ Date: _____

Address: _____

*witness must be 21 years of age or older.

NO ONE UNDER 20 YEARS OF AGE MAY PARTICIPATE IN THIS PROGRAM