



**FIRE ACADEMY  
PHYSICAL AGILITY TEST  
Assumption of Risk/ Waiver**

I, \_\_\_\_\_, residing at \_\_\_\_\_ in the city of \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_ acknowledge that I have voluntarily applied to participate in the **College of the Siskiyous Fire Academy Physical Ability Test (PAT)**. I have had the opportunity to review the **College of the Siskiyous Fire Academy PAT** description of events. I have acquired a physician's release for my participation in this test.

Prior to participating in this test, I will be given instructions for each of the events that make up the test. My participation in the **College of the Siskiyous Fire Academy PAT** is voluntary with the knowledge of the risks and hazards involved and I voluntarily assume full responsibility for any and all risks of loss, personal injury, death or property damage.

In consideration of being permitted to use equipment, facilities and structures owned by College of the Siskiyous for the purpose of participating in the **College of the Siskiyous Fire Academy PAT** and receiving instruction by college staff and volunteers, I agree that I and my heirs, distributes, guardians, legal representatives, and assigns will not make a claim against, sue, attach the property of, or prosecute College of the Siskiyous, its officers, employees, agents or volunteers or any affiliated agency for any loss, personal injury, death, or property damage occurring to me as a result of my participation in the **College of the Siskiyous Fire Academy PAT**. In addition, I release and discharge College of the Siskiyous, the COS Fire Academy, its officers, employees, agents or volunteers from all actions, claims, or demands that I and my heirs, distributes, guardians, legal representatives or assigns now or in the future may have for any loss, personal injury, death, or property damage resulting from my participation in the **College of the Siskiyous Fire Academy PAT**.

I agree for myself and my heirs, distributes, guardians, legal representatives, and assigns that in the event that any claim for loss, personal injury, death or property damage shall be prosecuted against College of the Siskiyous, its officers, employees, agents, or volunteers for actions taken as part of my participation in the **College of the Siskiyous Fire Academy PAT**, I shall indemnify and hold harmless College of the Siskiyous, its officers, employees, agents, or volunteers from any and all such claims or causes of action (including attorney's fees and costs) by whomever made and wherever presented.

In signing this release, I acknowledge that I have carefully read the above Waiver of Liability and Hold Harmless Agreement and fully understand its contents; I am aware that this is a release of liability and a contract between myself and College of the Siskiyous, the COS Fire Academy, and sign it voluntarily of my own free will; and I am at least eighteen (18) years of age and fully competent.

**If less than eighteen (18) years of age, parent or guardian is required to sign,**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian (if participant is less than 18)

\_\_\_\_\_  
Date