

W A I V E R

PHYSICAL AGILITY TESTS RADNOR TOWNSHIP POLICE DEPARTMENT

I, _____ (Name of Applicant),
and my heirs, beneficiaries, estate, and assigns do hereby agree to hold harmless Radnor
Township, the Radnor Township Police Department, Villanova University, and any employees
thereof for any injury or physical, psychological, or other defect or trauma sustained by me in
travelling to and from and in the course of performing *Physical Agility Tests* as part of my
application for possible appointment to the Radnor Township police department.

Signature of Applicant

Date