



ORANGE COUNTY FIRE RESCUE DEPARTMENT
Candidate Physical Ability Test (CPAT) Mentoring Program
AGREEMENT ASSUMING RISK OF INJURY OR DAMAGE
RELEASE OF LIABILITY AND INDEMNITY AGREEMENT

WHEREAS, I, _____,
(being/not being) over the age of eighteen and not employed by Orange County, having made a voluntary request to participate in the Orange County Fire/Rescue Department's (OCFRD) Candidate Physical Ability Test (CPAT) mentoring sessions, and

WHEREAS, the Candidate Physical Ability Test (CPAT) mentoring sessions will include, but not be limited to, aerobic, anaerobic, cardiovascular endurance, strengthening, and stamina training provided by OCFRD Certified Peer Fitness Trainers, for which I will provide medical clearance satisfactory to OCFRD, and

WHEREAS, the OCFRD is willing to allow me to participate in the CPAT mentoring sessions to become physically fit and prepared for the CPAT testing, I do hereby:

1. Release, waive, and forever discharge Orange County, its officers, employees and agents from any liability, actions, causes of action, damages, claims, and demands of every kind and nature whatsoever arising out of or resulting from participating in the CPAT mentoring sessions, or resulting from any act of omission on the part of any Orange County employee.
2. Agree to defend, indemnify and hold harmless Orange County, its officers, employees, and agents, against any and all manner of actions, causes of actions, suits, debts, claims, demands, damages, or liability or expense of every kind and nature incurred or arising by reason of any actual or claimed negligence or wrongful act or omission of mine while participating in the CPAT mentoring sessions.

This release, waiver and hold harmless agreement shall be binding upon me and my heirs, personal representatives, successors and assigns. **I hereby represent that I have carefully read and understand the contents of this document and sign the same of my own free will.**

_____ Date	_____ Signature
	_____ Print Name
Witness: _____	_____ Address
	_____ Contact Phone Number

IMPORTANT
<u>Note:</u> The completed form MUST BE RECEIVED by Orange County Fire Rescue Department, Safety & Wellness Bureau PRIOR to the participation in the program.

CAUTION
READ THIS DOCUMENT IN FULL BEFORE SIGNING