

**FRESNO COUNTY SHERIFF'S ACADEMY
PHYSICAL ACTIVITY PARTICIPATION
CERTIFICATION, WAIVER, & RELEASE**

I, _____, hereby certify and acknowledge that:
(Please type first and last name)

1. I have been advised that physical activities related to POST Learning Domains are a part of the **Basic Peace Officer Training offered at the Fresno County Sheriff's Office Criminology 108 Academy**. I have requested to enroll in the course and request to participate in the physical activities provided.
2. I have no known medical, physical, psychological or other reasons that would prevent me from participating in physical activities related to POST LD's in Module III or Module II.

THEREFORE, in consideration for permitting the above-named and undersigned applicant to participate in physical activities related to POST LD's in Module III or Module II, the undersigned hereby voluntarily releases, discharges, waives and relinquishes any and all actions of causes of action for personal injury, property damage or wrongful death occurring or arising as a result of receiving instructions on physical activities or the actual engagement in the physical activities or in participation in the physical fitness program. The undersigned agrees that under no circumstances will he/she or his/hers heirs, executors, administrators or assigns prosecute, present any claim for personal injury, property damage or wrongful death against California State University, Fresno, County of Fresno, Fresno Sheriff's Office, Fresno Sheriff's Foundation for Public Safety, or any of their officers, agents, servants or employees for any of the said causes of action, whether the same shall arise by negligence of any of the said persons otherwise.

IT IS THE INTENTION OF THE APPLICANT AND UNDERSIGNED BY THIS INSTRUMENT, TO THE EXEMPT AND RELIEVE CALIFORNIA STATE UNIVERSITY, FRESNO, THE COUNTY OF FRESNO, FRESNO COUNTY SHERIFF'S OFFICE, THE FRESNO SHERIFF'S FOUNDATION FOR PUBLIC SAFETY AND ANY OF THEIR OFFICERS, AGENTS, SERVANTS OR EMPLOYEES FROM LIABILITY FROM PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE.

The undersigned acknowledges that he/she has read the foregoing certification, waiver & release and understands fully content thereof, and that he/she has been completely advised of the potential dangers incidental to engaging in physical activities related to POST Learning Domains in Module III or Module II, and that he/she is fully aware of the legal consequences of signing the within instrument.

Signature _____ **Date:** _____
Sign in blue ink Type in the date