

## Tasmania Police Applicant FITNESS INDEMNITY CONSENT FORM

PERSONAL DECLARATION	
I (Applicant's full name & date of birth)	Of (address)

acknowledge and wholly absolve, release, and indemnify the Tasmania State Government, Commissioner of Police and their agents and staff against all claims, proceedings, demands and liabilities in relation to any injury or damage I may sustain as a result of my participation in the range of fitness assessments I am undertaking.

I hereby agree that I have had prior access to the assessments via the Tasmania Police Recruiting website. I have viewed and understand what each assessment involves, and I agree that I am medically fit to undertake all the fitness assessments.

I also agree that I am participating at my own risk and that I do not suffer from any known disability or condition which would prevent or limit my participation.

Applicant's Signature	Date
Witnessed By (Name and Signature)	Date
Williams and digitation (	

Tasmania Police Office Use Only	
Officer Full Name	Rank & Number

