



Wall Township Police Department

Phone: 732.449.4500 ~ Fax.732-449-1273

www.wallpolice.org



Kenneth Brown Jr.
Chief of Police

Applicant Waiver Form

Applicant Name: _____

Acknowledgement of Receipt of Waiver

I hereby absolve and release the Wall Township Police Department, it's members, the Township of Wall, the Wall Township Board of Education, from any injuries, damages to personal property or loss due to damage or theft of personal property that I may receive or incur during my participation in the Wall Township Police Department Applicant Physical Fitness Test, which is being conducted for the position of Patrolman in the Wall Township Police Department.

Applicant Signature: _____

Date: _____

Witness Signature: _____

Date: _____



P.O. Box 1168 / 2700 Allaire Rd ~ Wall Township NJ 07719

