Please read this carefully before signing

UNIVERSITY OF SOUTHERN INDIANA - CLUB SPORTS
ASSUMPTION OF RISK AND GENERAL WAIVER OF ALL CLAIMS

Get FIT Have FUN Live WELL

I, _____, the undersigned, affirm that I am participating voluntarily
Participant's Full Legal Name (print legibly)

in _____ at the University of Southern Indiana as a (circle one):
Name of Club Sport (print legibly)

Club Member **Volunteer** **Coach** **Alumni**

I (together with my parent or guardian, if I am under the age of eighteen or under a legal disability) represent covenant and agree, on behalf of myself and my heirs, assigns, and any other person claiming by, under, or through me, as follows:

☑ I acknowledge that participating in the above noted Activity can be hazardous, and has many inherent risks, including but not limited to contusions, concussions, breaks, cuts, sprains, strains, tears, and even death. I, for myself, my heirs, successors or assigns, hereby assume any and all risks, dangers, and hazards and the possibility of personal injury, death, property damage or loss attendant to these activities and waive any claim that I might have in any way resulting from my participation in this activity. I understand that I am responsible for my own safety, health and welfare during this activity.

☑ I acknowledge that it is my obligation to ensure my participation is consistent with any physical limitations I may have, and to consult with my physician to ensure that I am medically able to participate in this activity.

☑ In consideration of being afforded this opportunity to participate in this event, I, for myself, my heirs, successors or assigns, hereby release and hold harmless the University of Southern Indiana, its Board of Trustees, agents, servants, and employees from any and all claims, demands, causes of action or damages which may accrue on account of bodily or personal injury, property damage, or death arising from the negligence of the aforesaid parties.

☑ I also hereby grant the University of Southern Indiana permission to utilize my likeness for use by television, films, online, or printed media to further the aims of the University and do release them from any and all claims in its usage.

☑ I have read and I understand that this is an ASSUMPTION OF ALL RISKS AND A GENERAL WAIVER OF ANY AND ALL CLAIMS OR CAUSES OF ACTION, which I may have or might accrue as a result of the foregoing activities.

☑ I agree to abide by (and submit to) this club's Constitution and Bylaws, accessible online at www.usi.edu/rfw/club-sports.

☑ I understand that per University policy, student organizations and teams will share information with the Dean of Students Office regarding potential student safety and/or conduct concerns and that the Dean of Students may determine that further action or follow-up is warranted. For more information, please contact the Dean of Students Office at 812/464-1862 or via email at deanofstudents@usi.edu.

If any part of this Agreement is for any reason found to be invalid or unenforceable, the remaining provisions shall remain in full force and effect.

Executed on this date: _____
MM/DD/YYYY

_____ _____ _____
Participant's Signature **Student ID** **Date of Birth** (MM/DD/YYYY)

_____ **Gender:** (circle): Male | Female
Participant's Email Address

_____ (_____) _____
Participant's Address **City/State/Zip** **Cell Phone**

_____ _____ (_____) _____
Legal Guardian's Signature (if under 18) Legal Guardian's Name (if under 18) Legal Guardian's Phone Number (if under 18)

Classification (circle one): Freshman | Sophomore | Junior | Senior | Grad | Faculty | Staff | Volunteer |Coach **How long have you participated?** _____

If you are a club officer, what is your title? _____

Emergency Contact Name: _____ **Relationship**: _____ **Emergency Phone**: (_____) _____

MEDICAL CONDITIONS OR ALLERGIES? YES NO ☐IF YOU CIRCLED "YES", PLEASE EXPLAIN IN DETAIL ON THE REVERSE SIDE OF