Please complete:

_____Club

2008-2009
PENN STATE CLUB SPORTS PROGRAM

ASSUMPTION OF RISK

The Pennsylvania State University, University Park Club Sport Organizations involve strenuous physical activity. **Health professionals recommend that all participants complete a physical exam or have a doctor's approval prior to beginning any exercise program and strongly urge all participants over the age of 45 to have a graded exercise test prior to beginning any exercise program**.

The undersigned has read and understands the importance of securing a physician's approval of the undersigned's participation in the Pennsylvania State University, University Park _____ **Club** (henceforth referred to as the Club) activities prior to participation in those activities.

Participation in the Club involves inherent risk. Possible injuries include, but are not limited to, contusions, muscle strains and sprains, broken bones, lacerations, cardiac malfunction, head, neck, and back injury, paralysis, drowning (in water activities), and death. The undersigned understands that he/she should asses his/her physical condition and the possibility of injury.

The undersigned understands that he/she is fully responsible for any and all medical expenses that he/she might incur as a result of his/her participation in any of the Club's activities.

Participation in any Club Sports Program activity is contingent on proof of valid medical insurance coverage. The undersigned certifies that he/she has adequate medical insurance coverage that will cover any and all medical expenses resulting from his/her participation in any of the Club's activities.

A COPY OF PARTICIPANTS MEDICAL INSURANCE CARD OR PROOF OF MEDICAL INSURANCE MUST BE ATTACHED TO THIS FORM.

If the participant wishes to not disclose their policy #, he/she may black out the policy # on the copy of the card.

Policy Expiration Date _____

OFFICE USE ONLY:

Verification of Valid Proof of Insurance and Expiration Date _____

Initials of Club Sports Program Employee

The undersigned agrees that any travel conducted in conjunction with the Club is voluntary and discretionary. **THE UNIVERSITY DOES NOT ASSUME ANY LIABILITY FOR SUCH VOLUNTARY TRAVEL**.

The undersigned has read this document and fully understands the risks involved with participation in any Club Sports Program activity, and willingly agrees to accept and assume those risks.

Printed Name_____

Signature_____ **Date**_____

EMERGENCY CONTACT INFORMATION

Emergency Contact Name_____

Relationship to Participant_____

Emergency Contact Phone_____

2008-2009
PENN STATE CLUB SPORTS PROGRAM

PARTICIAPTION AGREEMENT

Club sport organizations and club sport organization participants may not engage in hazing activities. Hazing is defined as any action or situation that recklessly or intentionally endangers the mental or physical health or safety of a student or that willfully destroys or removes public or private property for the purpose of initiation or admission into or affiliation with, or as a condition for continued membership in any recognized student organization.

Consumption of alcohol is prohibited during all Club Sport Program activities, regardless of the age of the participants. Non-prescribed drugs, performance enhancing drugs, or any other substances that might be dangerous or detrimental to the participant's health, or performance as a member of this organization are also prohibited. Club activities are defined as any social, practice, competition, demonstration, clinic, or community service sponsored, hosted, or arranged by or for club members. Travel is considered a club activity from the time of departure to return.

All Club Sport Program participants have an obligation to refrain from actions and behavior that may jeopardize themselves or other Club Sports Program participants. The Club Sports Program reserves the right to remove participants from the program for actions/behavior that are deemed dangerous to themselves and/or other Club Sports Program participants.

The undersigned understand the above regulations, and agrees to conduct himself/herself in a safe and prudent manner at all times while participating in Pennsylvania State University, University Park _____**Club** activities.

Printed Name_____ **Phone Number**_____

Member Type: ☐ **Student** **PSU Email** _____

☐ **Faculty/Staff** **PSU Email** _____

☐ **Community** **Email** _____

Signature_____ **Date**_____

RELEASE OF ALL CLAIMS

In consideration of the Pennsylvania State University, University Park _____**Club (**henceforth referred to as the Club) providing instruction to me, attempting to further my knowledge, and permitting me to participate in the Club, **I,** _____**,** hereby agree to the following:

I hereby covenant not to bring any action legal, equitable, or otherwise, or to make any claim of any nature whatsoever against The Pennsylvania State University, its officers, trustees, employees, and agents, the Club and its officers, instructors, representatives and any other persons involved with the Club's activities, either directly or indirectly, for any personal injury or injuries, including death or property damage which I or others might sustain in engaging in the Club's activities necessarily or incidentally associated therewith.

1. I do hereby release and further discharge The Pennsylvania State University, its trustees, officers, employees, and agents, and the Club, its officers, instructors, representatives and any other persons, either directly or indirectly, of any responsibility or liability of any nature to me for any personal injuries, death or property damage which I may suffer or incur either directly or indirectly as a result of my participation in the Club's activities.
2. **I MAKE THESE COVENANTS, RELEASES AND WAIVERS KNOWINGLY AND VOLUNTARILY WITH FULL KNOWLEDGE OF ANY EXISTING DANGERS IN TRAINING, PRACTICING, PLAYING, TRAVELING, AND ENGAGING IN ANY OTHER CLUB ACTIVITIES; WHICH DANGERS I HEREBY FURTHER EXPRESSLY VOLUNTARILY ASSUME.**
3. I further make these covenants, releases, and waivers to bind myself, my executors, heirs, administrators and assigns to the fullest extent.
4. I do execute this Release with the intent to be legally bound hereby for myself and on behalf of my heirs, administrators, executors and assigns.

Printed Name_____ **Signature**_____

Date_____