

CAMPUS RECREATION SPORT CLUBS

2015-2016 Participant Waiver and Agreement

Please print the following information

UNIVERSITY OF DAYTON SPORT CLUB _____

PARTICIPANT NAME _____
LAST FIRST MI

STUDENT ID _____ **EMAIL** _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP CODE** _____

MOBILE PHONE _____

EMERGENCY CONTACT AND NUMBER _____

MEDICAL LIABILITY WAIVER

In signing this waiver, I certify my understanding that:

- 1 I am voluntarily participating in the aforementioned club.
- 2 I am aware of the risks involved in athletic and other various activities and that my participation may result in injury up to and including death.
- 3 I am aware that the organization's events could be held on or off campus and could include non-athletic events.
- 4 Assume any and all possible risks of injury and death that is involved with these activities.
- 5 I understand that the University of Dayton strongly recommends that I get a complete physical prior to my participation in the chosen club activity.
- 6 I understand that neither the University of Dayton nor the Campus Recreation department covers me under any health insurance policy.
- 7 I understand that I am responsible for all medical or all other costs arising out of any bodily injury or property damage sustained by me in the participating in these activities.

Furthermore: I hereby declare that I am in good health and have no mental or physical condition or symptoms that could interfere with my safety or the safety of others while participating in any activity using any equipment or facilities of UD Campus Recreation. Furthermore, I certify that I have adequate health insurance to cover any injury or damage that I may suffer while participating, or alternatively, agree to bear all costs associated with any such injury or damages to myself.

In consideration for permission and support by the University of Dayton for me to participate, I, the undersigned, do hereby release, hold harmless, indemnify, waive, and discharge the University of Dayton and all its officers, agents, and employees from and against any and all claims, demands, actions or causes of action arising from any injuries or damages I may suffer or sustain from my participation in, or use of, any facility, equipment, and/or programs. Furthermore, in full recognition and appreciation of the potential dangers and hazards inherent in athletic and other activities, I do hereby agree to assume any and all risks, liabilities, and responsibilities for all accidents, injuries, damages, or property losses arising from or related to my participation.

In the event of a medical emergency requiring more than basic first aid, I authorize University of Dayton officials and Board of Trustees of University of Dayton to secure from any licensed hospital, physician, and/or medical personnel any treatment deemed necessary for my immediate care and agree that I will be responsible for payment of any and all medical services rendered.

PARTICIPANT NAME (PRINT) _____

SIGNATURE _____ **DATE** _____

UNIVERSITY of
DAYTON

Campus Recreation

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CONDUCT/CIVILITY AGREEMENT

In signing this agreement, I certify my understanding that:

- 1 I represent through my behavior the University of Dayton, Campus Recreation and my respective sport club.
- 2 I will abide by all University of Dayton, Campus Recreation and the Student Standards of Behavior and Code of Conduct policies and procedures while participating in any event that is hosted, sponsored, or related to my respective sport club.
- 3 Failure to abide by these policies and procedures may result in suspension or termination of my status as a member of my respective sport club and/or disciplinary sanctions issued by the Student Conduct System.
- 4 I am expected to display a high level of sportsmanship and respect towards myself, my teammates, opposing team members and officials.
- 5 I am expected to respect and behave according to all regulations in place at all facilities, on and off campus, that I make use of in my participation in my respective sport club.
- 6 I understand that I must resign my officer position (if applicable) effective immediately if I am placed on University Probation through the Student Conduct System.

PARTICIPANT NAME (PRINT) _____

SIGNATURE _____ **DATE** _____

PARTICIPANT DUES AGREEMENT

In signing this agreement, I certify my understanding that:

- 1 I am expected and required to submit payment of \$ _____ to my respective sport club on or before (SUBMISSION DATE) _____.
- 2 Failure to submit dues on time may end in suspension or termination of membership in my respective club.
- 3 Checks need to be made payable to University of Dayton. Please put your respective sport club dues in the memo line of the check. (i.e. "Club Basketball Dues").
- 4 This document serves as a note of financial commitment to this team and I understand that injury, change of academic status or any other circumstance(s) beyond my control may excuse me from this commitment.

PARTICIPANT NAME (PRINT) _____

SIGNATURE _____ **DATE** _____