

Central Washington University Sport Club

Assumption of Risk

In consideration of being allowed to participate in the sport of _____, a recognized Sport Club Program at Central Washington University, I **hereby voluntarily assume all risks in participating in the above mentioned sport, including traveling to or from participation sites.** I understand that supervision by Central Washington University staff is not provided and by participating in the above named sport, **I am exposing myself to the risk of injury including but not limited to temporary or permanent muscle soreness, sprains, strains, cuts, abrasions, bruises, ligament and/or cartilage damage, head, or spinal injuries, loss of use of arms and/or legs, eye damage, disfigurement or even death.** I am also aware that there are other inherent risks of injuries that may occur by my participation in the above named sport that cannot be specifically listed.

I have carefully read the Assumption of Risk and fully understand its contents. This agreement is between Central Washington University and myself and I have signed the document on my own free will.

Signature: _____ Date: _____
DOCUMENT EFFECTIVE FROM THIS DATE FORWARD.

Signature of the Witness to the Signing of this Document: _____

If Signee is under the age of 18, parent or legal guardian must sign: _____

Membership Information

Last Name _____ First Name _____ Student ID # _____

Academic Year _____ Student Status: Fr So Jr Sr Age _____ Gender _____

Local Address

Street _____

City _____ State _____ Zip _____

Phone Number _____

Permanent Address

Street _____

City _____ State _____ Zip _____

Phone Number _____

Emergency Contact

Person _____
Name _____ Phone Number _____

Medical Insurance Information

Provider _____ Policy Number _____ Group Number _____

NOTE: The sport club program strongly encourages you to consult with a physician before participating in any physical activity to determine any potential conditions that may adversely affect your participation. We also encourage those with a pre-existing condition to wear a medical alert bracelet or neck tag indicating the appropriate medical information. We strongly recommend that all participants have a medical insurance policy that will cover injuries or illness that may occur due to participation in sport club activities.

Athlete Code of Conduct

As a participating athlete in the CWU Sport Club program I agree to abide by the following:

- I will conduct myself accordingly, responsibly, and professionally, at any and all Club Sport sponsored activities. This includes all home and away matches and any extracurricular activities.
- I will represent Central Washington University, the Sport Club department, and my team in a professional and positive manner.
- I will obey by the Sport club policies and procedures. This includes the Sport Club handbook, building policies, and university policies and procedures.
- I will show respect to all competition officials, opposing team members, spectators, and university employees.
- I will not use drugs (expect for medical purposes) while traveling, competing, socializing and while using facilities including lodging.
- I will not consume alcohol at events, practices (on and off campus), while traveling or using facilities including lodging.
- I will not participate in Hazing other participant, spectator, employee, or person in authority.

I understand that my actions may adversely affect my ability to participate in any of the remaining programs and/or remain as a functioning entity of Central Washington University Sport Programs. I understand that the following consequences are not progressive, meaning that one does not have to precede the other. I also understand that there are other consequences that I may suffer that are not listed below. Failure to comply with any of these policies will result in fines to my club or myself and/or any of the disciplinary actions listed below.

Warning- Written or verbal

Probation- Placed on contract by the Sport Club Coordinator

Suspension- Exclusion from all or some sport activities for duration of time based on severity of the offense

Expulsion-Permanent termination of Sport Club status and the incident may be turned over to CWU judicial officer and/or CWU police department.

In all cases, the club representative and/or club member involved will be scheduled to appear before the CWU Sport Club Coordinator.

I have read and understand the above stated Athlete Code of Conduct, and with my signature, I agree to abide by its contents.

Athlete's Name (Please Print) _____ **Date** _____

Signature _____ **Student ID #** _____

