

Northwestern University
Sport Club Program

Data Sheet/Informed Consent and Waiver

PRINT LEGIBLY!

Sport Club(s) _____ Date _____
(list all clubs you are a member of)

Member's Name _____ Male ___ Female ___

Student ID# _____ Email _____

Local Residence Phone number: _____

Cell Phone _____ Permanent Home Phone _____

Local Address _____

Permanent Address _____

In Case of an Emergency, notify (name, phone, address, relationship to you):

Who is covering your health insurance? ___ NU Plan – Undergrad ___ NU Plan – Graduate
___ Parent's Health Plan, ___ Spouse's Health Plan, ___ Employer's Health Plan

CAUTION: Read carefully before signing!

I, _____, desire to participate in the Northwestern University Sport Club Program. Each year, Northwestern University students form as many as thirty clubs that promote sporting activities. These clubs are provided with facility space and time, publicity, and faculty/staff supervision by the Department of Fitness and Recreation. Students, faculty, staff and their spouses may enjoy memberships in these sports clubs, whose orientation may be recreational, instructional, or competitive. I am informed that the Sport Club Program operates with coaches, some of whom may be former or present team members.

I am fully aware of the rules and hazards connected with participating in the NU Sport Club of _____. I knowingly and voluntarily assume the risk of any injuries, regardless of severity, and including death, that I may incur to myself and all risk of damage to or loss of property which may occur

as a result of my participation in the Sport Club Program or that may result when I am traveling in a University vehicle or personal vehicle to and from a University-sponsored event or to and from any Sport Club event.

I verify that I have no physical disabilities, impairments, or chemical dependencies that might inhibit my participation in sports activities, have major medical health insurance coverage which does not exclude injuries which result from participation in a sport club program, and that I have recently had a complete physical examination.

I, for myself, my heirs, successors, and assignees do hereby release, discharge and waive any and all responsibility of The Board of Trustees of Northwestern University, its officers, agents, representatives, and employees from and against all claims of liability from any and all trauma, injury, damage, expense, handicap, disability including death, and fro damage to or loss of property which may be suffered by arising our of, or in any way resulting from or attributable in whole or in part to my traveling to or from , training for, being coached in, using sports equipment, or participating in the above named Sport Club Program. No judgment on my skill level was exercised by Northwestern University in allowing me to participate in the Sport Club Program.

I agree to abide by all Northwestern University Department of Fitness and Recreation Sport Club Program rules and regulations regarding any and all of my participation in this program. This Informed Consent and Waiver Agreement will be construed under and pursuant to the laws of the State of Illinois.

I, the undersigned, am at least 18 years of age, am competent to sign this consent release and waiver and have read and understood all the provisions contained herein.

Signed_____ Date_____

Note: If under 18 years of age, parent or guardian must co-sign this release.

Signed (under 18)_____ Date_____

Co-Signed_____ Date_____

Witnessed By_____ Date_____