Fairfield University
Sport Club Participation Agreement

The ____________________ Club involves 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 an strongly urge all participants over the age of 45 to have a graded exercise test prior to beginning any exercise program.

Participation in the club involves strenuous physical activity including running and cardiovascular training. Possible injuries include, but are not limited to, muscle strains, back injuries, sprains, broken bones, strokes, cardiac malfunction, or other types of catastrophic injury. All participants must assess their physical condition and the possibility of injury.

The safe conduct of any group activity, such as Club Sports activities, is dependent upon the individual actions of each member of the group. The participant has an obligation to refrain from dangerous or disruptive activity that might endanger the participant or any other member of the group. The use of drugs, alcohol, or any other substances that might be dangerous or detrimental to the participant’s performance as a member of this organization is strictly prohibited. In addition:

A. 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 club activities.
B. The undersigned certifies that he/she has adequate medical/hospital insurance coverage that will cover any all medical expenses resulting from his/her participation in any of the club activities.
C. The undersigned agrees that any travel conducted in conjunction with club activities is voluntary and discretionary. THE UNIVERSITY DOES NOT ASSUME ANY LIABILITY FOR SUCH VOLUNTARY TRAVEL.

INSURANCE COMPANY ___________________________________________________
POLICY # ______________________________________________________________

1. The undersigned further agrees to conduct himself/herself in a SAFE and PRUDENT MANNER at all times while participating in club activities.
2. The undersigned has read and understands the importance of securing a physician’s approval of the undersigned’s participation in club activities.
3. The undersigned has read this Agreement and fully understands the risks involved with the club activities and willingly agrees to accept and assumes those risks during this club sport program and further agree to exonerate and save harmless the Club, its officers, trustees, agents and employees from any and all liability, claims, causes of action or demands of any kind and nature whatsoever which may arise by or in conjunction with the undersigned participation in any activities related to the Club.
4. The undersigned agrees to follow any verbal and/or written instructions provided by the coaches and/or supervisors during each Club activity.

___________________________________                                __________________________
Participant’s Signature                                                                       Date

__________________________________
Participant’s PRINTED Name