The advisor uses personal expertise and perspective to stimulate individual development of members and the overall development of the organization. The list that follows contains possible roles of an advisor. It is important that the advisor and organization communicate their expectations to each other. The advisor should be very clear about the things he/she will do, and the things he/she will not do. Please read the following statements and sign below:

**The Advisor should:**

1. Recognize and support participation in the student organization for its contributions to the educational and personal development of students.
2. Work with the student organization but not dictate the group’s programs or activities.
3. Be frank in offering suggestions, considerations or ideas and discussing possible consequence.
4. Be well informed about the plans and activities of the organization.
5. Attend some meetings and consult with the organization’s officers on a regular basis.
6. Know the goals and directions of the organization and should help the group evaluate its progress.
7. Be aware of the constitution and bylaws of the organization and help with the interpretation, if applicable.
8. Provide a source of continuity within the organization and be familiar with the organization’s history.
9. Familiarize him/herself with university policies and procedures and help the organization comply with them.
10. Stay aware of the general financial condition of the organization, and encourage good record keeping.
11. Be prepared to deal with major problems or emergencies within the organization.
12. Monitor group functioning and encourage members to fully participate, to assume appropriate responsibility for group activities, and to maintain a balance between academic and co-curricular commitments.

Signature: X _______________________________ Date ______/_____/_____

Print Name: _______________________________

Email: _________________________________

Contact Phone: ___________________________
ESU Club Sports are eligible to hire a coach on a sub-contracted basis. All coaches enter this agreement freely, and may be removed by the club officers and/or members at the conclusion of the contract. Club Coaches may not be compensated for more than $500/semester with SAA, Inc. Funds. Coaches who serve on a voluntary basis must complete a “Volunteer Contract” with the Human Resources Department. Please read the following statements and sign below:

**Responsibilities of Coach:**
1. Provide appropriate progression of warm-ups and skills prior to practices, scrimmages, and games.
2. Attend and oversee competitions and events
3. Provide a safe environment for club related events
4. Help to ensure good sportsmanship on the off the field.
5. Conduct self in a professional matter
6. Encourage the teams to hold various fund-raisers
7. Encourage the use of the Athletic Training Staff for injury prevention, attention and rehabilitation.
8. Acquire and maintain current coaching certifications as required by your individual league. (Note: SAA, Inc., will not provide compensation for any coaching certifications.)
9. Complete a SAA, Inc., Service Contract and W-9 Tax Form prior to the start of the playing season, and for each calendar year required.

**Coaches are NOT ELIGIBLE to take the following actions:**
1. Enter an agreement or sign any type of contract on behalf of the club sport and/or SAA, Inc.
2. Represent yourself as a full-time employee of the University or the SAA, Inc.
3. Interfere with the student’s administration of club-business matters.
4. Make any expenditures or gain access information regarding, any of the SAA, Inc., Accounts
5. Substitute any service-payment in exchange for membership dues.
6. Make a promise of monetary or other rewards to any player or prospective player.
7. Organize and/or implement international team travel.

**Signature:** X ___________________________  **Date** _____ / _____ / _____

**Print Name:** __________________________

**Email:** __________________________

**Contact Phone:** __________________________
CLUB SPORTS ADVISOR/COACH
CAMPUS REC & WELLNESS
ACCESS CONTRACT

The ESU Recreation Center understands and respects the contributions an advisor or coach can bring to an ESU sport club. This form allows an advisor/coach have access to the club’s practice without being a member of the facility.

ADVISOR/COACH’S INFORMATION

Name: _____________________________________________

Day Phone: (_____) _______-___________ Evening Phone: (_____) _______-___________

Email: ____________________________________________

EMERGENCY CONTACT

Name: __________________________ Relationship: __________________________

Day Phone: (_____) _______-___________ Evening Phone: (_____) _______-___________

ACCESS AGREEMENT

As an official coach/ advisor of the _______________________ club, I will be bound by the following:

· I am only permitted in Campus Rec & Wellness during the club’s approved reservation time. I will be permitted to access the facility 15 minutes prior to and must leave 15 minutes immediately following the reservation.

· I am only able to use the locker rooms, concourse, and the activity area assigned to the club for practice. All other areas are strictly prohibited.

· I understand that the club’s practice is limited to the approved location, time, and date and may not include any other activity area before, during, or following practice.

· I am NOT a member of Campus Rec & Wellness and do not have privileges as such (e.g. equipment rental, bringing guests, etc.).

· I am bound by all of the ESU Recreation Center Policies and Procedures (e.g., access, code of conduct, attire).

· I must have my activated eCard to access the building, and it must work at the turnstiles at the main entrance. Without this specific form of identification, I will not be granted access to the facility, as the staff is not able to verify your access rights with any other method.

· I understand that failure to follow the above guidelines and Campus Rec & Wellness policies and procedures will result in the immediate removal of my access to the center and/or cancellation or suspension of the club’s reservation privileges.

I HAVE CAREFULLY READ THIS, FULLY UNDERSTANDING ITS TERMS, AND UNDERSTANDING THAT BY VIRTUE THEREOF I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND DO HERewith SIGN IT VOLUNTARILy AND WITHOUT INDUCEMENT.

______________________________   ______________________________   ______
ADVISOR/COACH SIGNATURE   PRINT NAME   DATE
RELEASE OF LIABILITY

(IMPORTANT - READ BEFORE SIGNING)

I understand, agree and appreciate that Campus Rec & Wellness, located upon the campus of East Stroudsburg University and operated by the East Stroudsburg University Student Activity Association, Inc., provides a variety of facilities for activities including, but not limited to, a running track, an arena for competitive court sports such as volleyball and tennis, basketball; courts for sports such as racquetball, walleyball, squash, handball and paddleball, a studio for group fitness classes and activities such as aerobics, yoga, and karate, and a fitness center providing exercise equipment such as cardiovascular machines, machine weights and free weights. Additionally, as part of the programs offered, sports and camping equipment may be lent out for activities to be engaged in outside Campus Rec & Wellness facility. I voluntarily and freely agree to engage in these activities, acknowledging that participation in any physical activity involves some degree of personal risk to health. The degree and extent of participation remains my choice, based on what I can comfortably and willingly risk. Yet there is a risk, both known and unknown, which must be assumed by me, that I may suffer serious physical injury or disability, or even death.

In accordance therewith, in consideration of my participation in the recreational programs offered by the East Stroudsburg University Student Activity Association, Inc., at Campus Rec & Wellness facility, as well as the use of any sports or camping equipment lent out to me or that I may use through that facility, I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby RELEASE AND HOLD HARMLESS The East Stroudsburg University Student Activity Association, Inc., East Stroudsburg University, as well as their respective officers, officials, agents and/or employees, and any other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, lessors of Campus Rec & Wellness facility, or portions thereof, used in my participation in activities made available to me at or by Campus Rec & Wellness (hereafter referred to collectively as the “Releasees”), with respect to any and all injury, disability, death and/or loss or damage to person or property, unless arising from the recklessness and wanton disregard of the Releasees.

I HAVE CAREFULLY READ THIS RELEASE OF LIABILITY, WHEREIN I HAVE ALSO ASSUMED THE RISK OF MY PARTICIPATION IN ACTIVITIES AND USE OF EQUIPMENT MADE AVAILABLE OR LENT TO ME AT OR BY CAMPUS REC & WELLNESS, FULLY UNDERSTANDING ITS TERMS, AND UNDERSTANDING THAT BY VIRTUE THEREOF I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND DO HEREWITH SIGN IT VOLUNTARILY AND WITHOUT INDUCEMENT.

______________________________  ________________  _____________
ADVISOR/COACH SIGNATURE      PRINT NAME      DATE
East Stroudsburg University Student Activity Association Inc.

Service Contract between

________________________________________________________

Name of Sponsoring Organization

and

________________________________________________________

Name of Individual/Company Providing Service

IT IS AGREED:

1. That the above names individual/company will provide services listed below at: ________________________________________________

   (location)

   for the following program: ________________________________________________

   and during the time period listed below:

   DATE (S), TIMES AND DESCRIPTION OF SERVICES TO BE PERFORMED:

   ________________________________________________

   ________________________________________________

   ________________________________________________

   ________________________________________________

   ________________________________________________

2. The total fee for these services shall be $______________________ with payment terms as noted here:

   ________________________________________________

3. The named individual holds him or herself out to be an independent contractor having adequate health, accident and liability insurance.

4. The named individual shall be responsible and obligated to inform the sponsoring organization, through the sponsoring organization’s designated agent present at the activity site, of any physical defects or dangerous conditions pertaining to the facilities of East Stroudsburg University at the activity site, of which named individual, its agents and employees, have actual knowledge.

5. The named individual shall hold harmless and release the Student Activity Association of East Stroudsburg University, its agents and employees, and the named organization from any and all liability resulting from injury or property damage which is caused by the names individual, its agents, or anyone acting on its behalf. Furthermore, the named individual agrees to waive any and all rights or claims it may have against East Stroudsburg University, being a separate legal entity from the named organization, on account of injury or property damage to the named individual.

6. Additional Provisions:

I UNDERSTAND AND AGREE TO THE TERMS OF THIS CONTRACT AND A COMPLETED W9 FORM IS ATTACHED

SIGNATURE: ________________________________ DATE: __________________

SOCIAL SECURITY/FEDERAL IDENTIFICATION NUMBER: ___________________ 

MAILING ADDRESS: ____________________________________________________

ADVISOR OF ORGANIZATION/COORDINATOR OF PROGRAM: ___________________ 

DIRECTOR OF BUSINESS SERVICES, SAA, INC (OR DESIGNEE): ___________________

DATE: __________________ (Revised 4/1/10)