I, _____________________________________________________________, desire to participate in the
(Student Name, Please Print, USE PEN ONLY)
_______________________________________________________
(Fall 20_____ or Spring 20 _____)
(Student Organization)

I realize that this SAA program operates with volunteer nonprofessional instructors. I also realize that injuries are an
inevitable consequence of participating in physical activities and that no amount of reasonable coaching, instruction, use
or proper equipment, or facilities will prevent all injuries. I realize, and understand, that severe injuries are possible even
from sports which have little or no body contact. I understand and appreciate that such injuries can range from the most
insignificant to death; serious neck and spinal injuries which may result in partial or total paralysis; brain damage; loss of
sight, hearing, sense of smell; serious and permanent injury to all bodily organs and functions; serious injury to general
health and well being. I realize that my use of vehicular transportation to and from sporting activities, whether
participating as a driver or passenger, and whether using either SAA-supplied vehicles or vehicles of private individuals,
although not an inherently dangerous activity, nonetheless, also entails risks or injury to persons, and to property. I
understand and am aware that I will be responsible for my actions and conducting myself as outlined in the ESU Student
Code of Conduct. I am aware of the existence of the risks that I take. I appreciate their character and voluntarily assume
all risks of harm. I have carefully considered how the possible consequences of injury may impact my life, and I chose to
accept these risks and participate in the
______________________________________________________________________________________________
(Student Organization)

FOR PARTICIPANTS OF MINOR AGE

This is to certify that I, as parent/guardian with legal responsibility for this participant, do herewith consent and agree to
his/her release as provided above, of all the Releases , and, for myself, my heirs, assigns, and next of kin, I release and
agree to indemnify the Releases from any and all liabilities to my minor child’s involvement or participation in SAA
sponsored club activities and programs as regards the provisions of transportation, unless arising from the
recklessness and wanton disregard of the Releases.

Parent/Guardian Signature: X______________________________________ Date: ______/______/______
Print Parent/Guardian Name: _____________________________________
Emergency Telephone Number: (________) ________ - _______________