



BETHEL STUDENT GOVERNMENT
Clubs and Organizations

Athlete's Risk Acknowledgement and Consent to Participate

Club Sports at Bethel University are sponsored and supported through the Bethel Student Government (BSG) and offered to provide students with the opportunity to compete on intercollegiate athletic teams that may not be available through varsity athletic programs.

PLEASE READ CAREFULLY ALL INFORMATION BELOW: All athletes must personally fill out all information and sign this form before they will be permitted to practice or play on Club Sports teams.*

Name: _____ Date of Birth: _____

I wish to participate in the BSG sponsored club sport of _____ during the _____ (year) season.

I realize that there are risks involved in my participation. I understand that these risks include a full range of injuries from severe to minor including the possibility that I might die, become paralyzed, or suffer other serious, permanent disability as a result of my participation in this Club Sport. I acknowledge that neither the protective equipment used in the sport, the safety rules and procedures of this sport, or the coaching I receive will guarantee my safety or prevent all injuries I might sustain.

I agree that if I am injured ***I WILL NOT hold the Bethel Student Government, Bethel University, or Bethel personnel liable for such injuries.***

I understand that the University requires me to disclose any health condition I have, including pre-existing injuries, which may affect my ability to safely participate in this sports program. I have disclosed the following information:

_____. I have discussed this health condition and associated risks with the coach and the Club Advisor.

My signature below confirms my understanding and acceptance of the risks associated with my participation in this Club Sport.

I understand that MEDICAL INSURANCE IS REQUIRED for my participation in this Club Sport and that Bethel DOES NOT provide this insurance coverage. My signature below certifies that I have appropriate insurance coverage for this participation.

Signature*

Date

*If I am below the age of 18, this form must be signed by a parent or guardian.

Signature of parent or guardian (if required)

Date