



PSUAC Participation Agreement

Participation in the Commonwealth Campus Athletic Program may pose significant health risks. These sports programs involve physical contact, collisions, and aggressive play with an inherent degree of risk. Possible injuries include, but are not limited to, muscle strains, concussions, eye or facial injuries, confusion, lacerations, sprains, bone fractures and rarely stroke, cardiac malfunction, spinal cord damage or other types of catastrophic injury. **All participants must assess their physical condition and possibility of injury. This assessment may be determined by a physician at the time of a physical examination.**

The safe conduct of any group activity such as the Commonwealth Campus Athletic Program is dependent upon the individual actions of each member of the group. You, the participant, have an obligation to refrain from dangerous or disruptive activity that might endanger yourself or any other member of the group. The use of drugs, alcohol or any other substances that might be dangerous or detrimental to your performance as a member of this organization is strictly prohibited. In consideration of his/her participation in the Commonwealth Campus Athletic Program, the undersigned with intent to be legally bound, agree as follows:

- 1) The undersigned understands that his/her personal health insurance will constitute the primary coverage for any medical treatment he/she might require as a result of his/her participation in the Commonwealth Athletic Program.
- 2) The undersigned hereby certifies that he/she has adequate medical/hospital health insurance coverage that will cover medical expenses resulting from his/her participation in the Commonwealth Campus Athletic Program. In the event there is no health insurance available, an **AFFIDAVIT OF NO INSURANCE**, will be properly executed by his/her parents.

If there is a material change in the participant's health insurance coverage or it expires, the participant agrees to notify Penn State University of this development and update his/her health insurance information already on file with the University.

- 3) The undersigned agrees to conduct himself/herself in a safe and prudent manner at all times while participating in a Commonwealth Campus Athletic Program.
- 4) The undersigned has read and understands the risks involved with the Commonwealth Campus Athletic Program.
- 5) The undersigned agrees to follow any verbal and/or written instructions provided during each session.

(print student's name)

(PSU ID Number)

(student's signature)

(date)