

## Registered Student Organization and Chartered Greek Organization Agreement to Participate – Graduate Students

I am aware that as a member of a Registered Student Organization or Chartered Greek Organization (“RSO/CGO”) at the University of Delaware (the “University”), I may voluntarily choose to participate in all or some activities of the RSO/CGO, including but not limited to, practicing or playing in a sport or recreational activity and traveling to and from such sports or activities.

I am aware that participating in, practicing or playing any sport or recreational activity can be dangerous and can involve many risks or injury. I understand that the dangers and risks of participating, playing or practicing include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all bones, joint, ligaments, muscles, tendons and other aspects of my body, general health and well-being. I am also aware that traveling to and from such activities can present dangers.

Because of these dangers of participating in the RSO/CGO, I recognize the importance of following the organization’s instructions regarding playing techniques, training, rules of the sport and other organization rules, and to obey such instructions. I also recognize the importance of following University rules and regulations and all federal, state and local laws and regulations.

I understand and am fully aware of the risks and hazards connected with my voluntary participation in the RSO/CGO. I am aware that by participating, I run the risk of injury to myself or damage to property. I hereby elect to participate voluntarily in the event. I understand that the University does not require me to participate in this activity.

In consideration for receiving permission from the University to participate in a RSO/CGO, including all activities related to the RSO/CGO, I hereby release, waive, discharge and covenant not to sue the University of Delaware, its Board of Trustees, officers, agents and employees (hereinafter referred to collectively as “Releasees”) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage or injury, including death, that may be sustained by me, or to any property belonging to me, while participating in such activity, while in, on or upon the premises where the activity is being conducted, regardless of whether such loss is caused by the negligence of the Releasees, or otherwise and regardless of whether such liability arises in tort, contract, strict liability, or otherwise, to the fullest extent allowed by law.

### STUDENT LIFE



University Student Centers  
115 Perkins Student Center  
Newark, DE 19716-6170  
Phone: 302-831-2633

In consideration for the University's permitting me to practice, play or try out for the RSO/CGO and to engage in all activities related to the RSO/CGO, including practicing, playing and travel, I hereby voluntarily assume all risks associated with participation and agree to exonerate and save harmless the University, its trustees, agents, servants 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 connection with my participation in any activities related to the RSO/CGO.

It is my express intent that this Agreement, including the waiver of liability and hold harmless provisions contained herein, shall bind the members of my family, spouse, heirs, assigns and personal representatives, and shall be deemed as a release, waiver, discharge and covenant not to sue the abovenamed Releasees. This agreement shall be construed in accordance with the laws of the State of Delaware. Any mediation, suit or other proceeding relating to the terms of this agreement must be filed only by the federal or state courts of Delaware.

I am in good health and able to participate in an RSO/CGO. I hereby consent to first aid, emergency medical care and, if necessary, admission to an accredited hospital or an emergency care center when necessary for executing such care, for the treatment of injuries that I may sustain while participating in an activity related to my participation in an RSO/CGO.

I am responsible for my own medical insurance and will maintain that insurance throughout my entire period of participation while a member of an RSO/CGO. I will assume any additional expenses incurred which go beyond my health coverage. I will notify the Student Involvement Office of any significant injury that requires medical attention. I understand that this waiver shall be effective as long as I participate in an RSO/CGO. Further, I agree that I am obligated to notify the University if any of the information contained herein changes.



IN SIGNING THIS AGREEMENT, I ACKNOWLEDGE AND REPRESENT THAT I HAVE READ THE FOREGOING AGREEMENT, UNDERSTAND IT AND SIGN IT VOLUNTARILY AS MY OWN FREE ACT AND DEED. NO ORAL REPRESENTATIONS, STATEMENTS OR INDUCEMENTS, APART FROM THE FOREGOING WRITTEN AGREEMENT, HAVE BEEN MADE. I AM AT LEAST 18 YEARS OF AGE AND FULLY COMPETENT, AND I EXECUTE THIS AGREEMENT FOR FULL, ADEQUATE AND COMPLETE CONSIDERATION FULLY INTENDING TO BE BOUND BY SAME.

By my signature on this form, I acknowledge that I have read the above Agreement and I am a full-time graduate student at the University.

All information below must be completed.

Student participant name (print): \_\_\_\_\_

Student participant signature: \_\_\_\_\_

Date: \_\_\_\_\_

Student's UDel email: \_\_\_\_\_

Graduating year: \_\_\_\_\_

Insurance provider: \_\_\_\_\_

Insurance policy number: \_\_\_\_\_

Emergency contact name: \_\_\_\_\_

Emergency contact phone number: \_\_\_\_\_

RSO/CGO sponsoring the event: \_\_\_\_\_

## STUDENT LIFE