

Appalachian State University

UREC Club Sports

Game Contract Form

~FORM KEPT ON FILE IN CLUB SPORTS OFFICE~



Required Information:

GAME/MATCH AGREEMENT CONTRACT BETWEEN APPALACHIAN STATE UNIVERSITY

UREC Club Sport: AND Visiting Club:

Date of Contest: Time of Contest:

Site: Official Name:

Official Name: Officials to be paid by:

Type of Game/Match:

Scrimmage Conference Non-Conference Other

ASU UREC Club Sports Team President:

Visiting Club Sports Team President:

Name:

Name:

Phone #:

Phone #:

Signature: _____

Signature: _____

Date:

Date:

****By signing below, I am stating that I have been informed and give my individualized consent to all the information stated on this form****

	Name of Visiting Participant	E-mail Address	Phone Number	Signature
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
5.	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
6.	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
7.	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
8.	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
9.	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
10.	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____

	Name of Visiting Participant	E-mail Address	Phone Number	Signature
11.				_____
12.				_____
13.				_____
14.				_____
15.				_____
16.				_____
17.				_____
18.				_____
19.				_____
20.				_____
21.				_____
22.				_____
23.				_____
24.				_____
25.				_____

Visiting Team President must have all participants read the following information and then sign this release form before participating in a Club Sports Activity at Appalachian State University.

****PLEASE READ THIS ENTIRE DOCUMENT CAREFULLY: THIS RELEASES APPALACHIAN STATE UNIVERSITY FROM ANY AND ALL LIABILITY RESULTING FROM ANY PARTICIPATION IN THE ABOVE CLUB SPORTS ACTIVITY****

I understand and agree that Appalachian State University assumes NO RESPONSIBILITY for sickness, death, injuries, or property damage incurred through participation in any club sports event. As a participant in this program, I agree to assume all risks of any injuries that I may incur. Some Club Sports activities are inherently more dangerous than others. By signing, I indicate that I know the risks in this club/activity, have had a physical, have adequate health/medical care insurance, and understand that Appalachian State University, its agents and employees assume no responsibility of safety to me or my property and makes no representation, express or implied, regarding the adequacy of safety of club sports activities.

President's Name (Print):

Date Submitted:

President Signature: _____

Use Additional Sheets for Additional Participants