

RUGBY WAIVER

RELEASE AND ASSUMPTION OF RISK ARISING FROM PARTICIPATION IN THE RUGBY CLUB

- Name

First Name

Last Name

Required

- Check One

☐ I have coverage under the Student Accident and Sickness policy made available through Duke University. ☐ I have other coverage of insurance for accident and sickness.

Required

- Policy Number

Required

- Policy Owner's Name

First Name

Last Name

Required

- Company Name

Required

- Expiration Date

Required

- I intend to participate in activities sponsored by the Duke University Rugby Club. I realize that rugby is a collision sport. I certify that I am medically sound and physically fit to play rugby. No warranties or representations have been made to me regarding the fitness, safety, or working order of the property, equipment, or facilities furnished by others, including Duke University. I am aware of and voluntarily assume all risk to myself and property, (including accident, injury, illness, death, damage, or destruction) arising from my participation in rugby. Further, I assume such risks regardless of their causes, which may include, but are not limited to, the failure to enforce rules or regulations; the failure to inspect equipment, facilities, or personnel; the failure to supervise any persons; the traveling to and from game or performance sites; the inherent risk of playing a contact sport without protective equipment; the scrum; bodily contact; and the negligence of others (including the negligence of Duke University). I understand that it is not the purpose of the club to teach safety rules, nor is it the function of the club or its officers to serve as the guardians of my safety. In particular, I realize my cleats should be in good condition and cannot contain any sharp sections. I recognize the value of mouthpieces, shin guards and braces, and the risks inherent in not using them. I am responsible for my protective equipment necessary to ensure my safety during games and practices. Furthermore, I will note weather conditions and voluntarily assume all risks arising from such conditions. I will also note the condition of the field and assume all risks relating to its use by myself and others. In consideration of the Duke University’s sponsoring the Rugby Club and permitting me to participate, I release, discharge, and forever hold harmless Duke University and its trustees, officers, agents, and employees and the club and its officers from any liabilities, claims, damages, or losses stemming from injury to person or property that arises from, or in any way relates to, my participation in rugby activities. I have carefully read this Release and Assumption of Risk, fully understanding its contents, voluntarily sign it, and realize that it will bind me, my heirs, and my personal representatives.

- Signature

Required

- Date

Required

- Parent/Guardian Signature if Under 18

- Date

