

ACKNOWLEDGEMENT OF RISK & LIMITED RELEASE OF LIABILITY
2022-2023

Michigan State University, a public educational institution, here includes its Board of Trustees, employees, volunteers, and students (“MSU”).

I _____, freely choose to participate in Michigan State University’s Club Sports Program (“Program”) as a member/participant in activities of the Men’s Club Soccer Team.

I recognize that participation in activities of the Program involves the risk of serious injury, and potentially even the loss of limb or life. Some of the risks are predictable in nature, but unanticipated consequences are also possible. Participation may require me to travel in a personal vehicle or rented vehicle. Knowing all this, I want to participate in the Program. I accept the risks and I assume responsibility for my participation.

I understand that participation in this Program is voluntary. I may withdraw at any time. I certify that I have the skills, physical ability and training needed to safely participate in the Program. (I understand I need to direct any questions I may have in this regard to the coach or other responsible individual associated with the team or activity.)

In case of a medical emergency occurring during my participation in this Program, I authorize MSU to secure whatever medical care is deemed necessary. MSU may, but is not obliged, to take actions it deems warranted for my health and safety. I agree to pay all expenses for such care and I release MSU from liability for any such expense.

Knowing that Program participation entails various risks, and in consideration for being permitted to participate, I release MSU from any and all costs, claims, and liability which may arise in connection with my Program participation, except insofar as such costs, claims, and losses are caused by intentional misconduct or gross negligence on MSU’s part.

I accept the Program rules and regulations. I understand that I need to look to my own insurance coverage in case of injury. I have read and fully understand this document.

DATE: _____

Participant Signature