Sport Club Parental Consent Form
If Under the Age of 19

Club Name:
_______________________________________________________________________

Each member under the age of 19 must have their parent read and sign this form before any authorized participation in club activities can take place.

I am aware that participating in the above-listed sport can be a dangerous activity with risk of injury. I understand that my son/daughter’s participation in the following activity could lead to injuries such as, but not limited to, sprains and strains of muscles and joints, serious neck and spinal injuries, injury or impairment to other aspects of my body, general health and well-being, and in severe cases, even death. I agree to allow The University of Alabama’s supervisors and athletic trainers to treat my son/daughter in cases of emergency. Because of the potential dangers in participating, I recognize the importance of following the supervisors’ instructions and adhering to all rules set forth by the Department of Recreational Services, University Recreation, and The University of Alabama. I hereby voluntarily release the right to hold the Department of Recreational Services, University Recreation, and The University of Alabama, employees and staff from any and all responsibility should injuries, losses or damages of any kind be caused by my son/daughter’s participation in the above-named activity. I agree to be personally responsible for any damages to any property caused by my son/daughter’s negligence or failure to follow instructions, rules and regulations.

My signature below demonstrates my understanding of all the previous information and my willingness to comply with these guidelines:

Name of Student (print):
_______________________________________________________________

Student Signature:
____________________________________________________________________

Date:
______________________________________________________________________________

Name of Parent(s) (print):
______________________________________________________________

Parent Signature:________________________
____________________________________________________________________

Date:
______________________________________________________________________________

(Only one parent signature is required)