

SPORT CLUB TEAM: _____

THE COLLEGE OF NEW JERSEY ATHLETIC, INTRAMURAL, RECREATION
SPORT CLUB RELEASE WAIVER

I, _____, HEREBY RELEASE THE TRUSTEES OF THE COLLEGE OF NEW JERSEY AND ALL OFFICERS, FACULTY, AGENTS, STAFF, STUDENTS, OR ORGANIZATIONS OF SAID COLLEGE, FROM ANY RESPONSIBILITY OR LIABILITY FOR PERSONAL INJURY SUSTAINED BY HIM OR HER AND FOR ANY PROPERTY DAMAGE CAUSED BY HIM OR HER DURING OR BECAUSE OF HIS OR HER PARTICIPATION IN ANY SPORT CLUB ACTIVITIES. I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO HAVE THE COLLEGE OF NEW JERSEY INSURANCE OR PERSONAL INSURANCE BEFORE I PARTICIPATE.

DATED THIS _____ DAY NAME: _____

_____, 20 ____ SIGNATURE: _____

HEALTH INSURANCE: _____ ADDRESS: _____

POLICY #: _____

E-MAIL ADDRESS: _____

PHONE #: _____

CELL PHONE #: _____

STUDENT ID #: _____

EMERGENCY CONTACT INFORMATION: _____

RELATIONSHIP: _____

ADDRESS: _____

PHONE #: _____

CELL PHONE #: _____