

Appendix D
Western Carolina University
Athletic Training Department
Assumption of Risk Form

I understand that participation in intercollegiate athletics is an inherently dangerous activity and that there is genuine and serious risk to anyone who engages in this activity.

Due to the nature of the physical violence and collisions that are a part of intercollegiate athletics, I understand that the risk of serious physical injury, including catastrophic injury resulting in permanent paralysis, brain injury or death does exist.

I knowingly assume responsibility for any and all such risks and any resulting injuries, including death. I do hereby voluntarily choose to participate in this event in spite of the risks.

I, _____ (print name), have read and understand the above document. A certified athletic trainer has further discussed this topic with me and I fully understand the risks involved with my participation in intercollegiate athletics at Western Carolina University.

Athlete Signature

Date

Parent signature (if athlete is not 18) Date

Certified Athletic Trainer Signature

Date