The College of Wooster Club Sports Manual

Co-Authored by:

Campus Council’s Club Sports Committee
&
Lowry Center and Student Activities
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I. Overview

A. What is a club sport?

At the College of Wooster, a club sport is defined as an organized athletic or physical activity that is typically not already a Varsity Sport or an Intramural Sport, and is open to any interested student, not being exclusionary. Club Sports are established and managed by students. As such, they reflect the Core Values (https://www.wooster.edu/about/leadership/mission/) of the College by encouraging leadership, inclusivity, and community-building, as well as contributing to the physical and social well-being of the students involved.

B. The Purpose of The Handbook

The handbook outlines the policies and procedures that govern the operation of Club Sports at the College of Wooster. All club and organization members and officers should be familiar with the content of this handbook, which should serve as a guide for establishing new Club Sports and managing existing organizations.

II. Eligibility and Recognition

A. Eligibility

The membership to any club sport organization is open to all current College of Wooster students. Members must complete and submit a Waiver of Liability, Assumption of Risk and Indemnity to the Lowry Center and Student Activities office before they can participate in activities of the organization. The Waiver of Liability, Assumption of Risk and Indemnity is provided in the Required Documents section of this manual.

Since club sports carry potential risks, all club sport members must provide evidence of accident health insurance to Lowry Center and Student Activities. Such insurance shall not include an athletic activity exclusion.

Note: If any participant on a club sports team is placed on Academic Probation, they will still be able to participate in the events on Campus, but they will be prohibited from traveling with said team to events outside the campus of The College of Wooster. The Lowry Center and Student Activities Office will consult with the Dean of Students office each semester regarding any members academic standing. Students on academic probation may petition to the Dean of Students or academic advisor to lift travel stipulations.

B. Recognition and Chartering

The Campus Council Charter Committee will consult the Club Sports manual when considering charters for new club sports organizations to make sure they are in compliance. Charter Committee will then go through the usual process of considering the organization’s charter application. If a club sport organization does not comply with Club Sports manual, it may not be approved for chartered status by the Charter Committee.

The items below must be included in a group’s charter for it to be approved by Charter Committee, in addition to other Charter requirements:

- Outline of injury plan (See Section VII)
- Risk mitigation strategies
- Number of students that have or will have training/certification based on number of group members (See Risk Management and Safety)
- National/international organization or reputable organization or association that provides health and safety standards by which the group abides
- Full Club Roster (See Section VIII)
Club Sports organizations will either receive chartered status or their application will be rejected. No club sport can exist only as a Recognized Group, due to considerations of liability. Chartering is contingent upon the club gaining membership in a national/international organization, whenever available. The College of Wooster club must participate in any liability insurance program offered by the national/international organization at the club’s expense. Failure to comply with this provision will result in having the club’s approval revoked. Club Sports must also submit a roster of membership by the fifth week of classes every semester and whenever the roster is updated for the addition or removal of members.

III. Responsibilities and Rules

A. General

(i) Educational Mission

Each organization should not interfere with the college's educational mission. No clubs may schedule competitions/games/practices/travel during the week of reading days or final exams. Please see page 19 of the Scot’s Key for additional details.

(ii) Rules

The organization must abide by all of the College of Wooster rules and regulations as well as the rules and regulations of the sport or any national/international organization they might be affiliated with.

As student organizations are funded at least partially through the Student Activities Fee, it is the responsibility of each club sport to give back to The College of Wooster community in some way. Therefore, each group is required to host at least one event every school year that allows their group to interact with The College of Wooster community. This event will not count as work for international students, as it is only to facilitate funding for the group to be able to participate with other groups in their sport. These events can be home games, intramural events, open practices, or other events that are a) approved by the Campus Council Club Sports committee, b) related to the activity, and c) related to the purpose and mission of the club sport.

All club sports are required to meet with the Director of Lowry Center and Student Activities, as well as their advisors, at least once per semester to discuss activities, paperwork, travel itineraries, and general compliance with the Club Sports Manual. Please contact Lowry Center and Student Activities to schedule an appointment.

***All club sports organization must turn in all required forms to the Lowry Center and Student Activities Office on time. This includes: Waiver of Liability, Assumption of Risk and Indemnity, and your Annual/Mid-Year report to be turned in with or before turning in your correlating charters. Failure to meet these deadlines may result in your charter being reviewed and losing access to funds. ***

(iii) Competition

If the organization wishes to compete, they must do so with teams of similar standing, and in an environment conducive to player safety. If applicable, all competition must be conducted with an officiating crew recognized by the club’s national/international organization. If an organization wishes to host a competition on campus, they must fill out the Club Sport Competition Registration form and turn it into staff at Lowry Center and Student Activities at least two weeks prior to the event. Organizations must also complete a reservation on Connect Daily and an Outdoor Request Form.

B. Risk Management and Safety

A. Concussion Management
Lowry Center and Student Activities requires that all Club Sports participants are required to sign the Club Sports Member Injury, Illness and Concussion Reporting Acknowledgement Form in which members accept the responsibility for reporting their injuries and illnesses to the Wellness Center staff, including signs and symptoms of concussions.

During the review and signing process members will be provided with NCAA educational material on concussions. Members are to be specifically educated on concussion signs and symptoms and the CDC’s return to play protocol. Purposeful or flagrant head contact is not permitted or safe in any sport, and that no piece of equipment (helmet, facemask, mouthpiece, and shield) prevents concussions.

Educational materials from the NCAA, The CDC’s return to play protocol and the Club Sports Member Injury, Illness and Concussion Reporting Acknowledgement Form can be found in the documents section on pages 19-21.

B. Required Trainings and Failure to Comply

- It is required that each organization be responsible to have 20% or four members of their team, whichever is less, certified in each of the following: CPR, First Aid, Basic Concussion Recognition and Prevention Training, and Bloodborne Pathogen Training. The Center for Disease Control’s online Heads Up Concussion Training https://headsup.cdc.gov/ program is highly recommended, however any accredited Concussion Recognition and Prevention First Aid training, CPR training, and Bloodborne Pathogen training is acceptable. American Red Cross CPR/First-Aid and AED training is available through trained staff at the College. Certifications must be on file with Lowry Center and Student Activities. It is required at least one certified member must be at every practice and all competitions in which their organization is participating. The members of the club sport are responsible for complying with these requirements. In addition, organizations must have a fully supplied first aid medic bag at every practice and competition. Campus Council will provide funding to purchase and maintain medic bags for each Club Sport organization. First aid medic bags can be checked out and refilled in the Lowry Center and Student Activities Office.

- In addition to these trainings, club sports must abide by the health and safety standards outlined by their national/international organizations or any well-respected organizations or associations that provide health and safety standards for their sport(s). If these organizations or associations provide or require certifications for participation, groups must have at least 20% or 4 members, whichever is less, certified. High risk sports (e.g., Quidditch, WOODS) must have at least 30% certified. If there is overlap in school-provided training and training provided by sport-specific reputable organizations, groups are encouraged to engage in both; however, the trainings provided by sport-specific reputable organizations are preferred. Club Sports should take any and all preventative trainings available. If students need assistance determining where trainings can be obtained, they should contact the Lowry Center and Student Activities Office.

- Failure to comply with health and safety standards and oversight regarding additional trainings on the part of the group may result in redacted funding from Budget Committee and/or loss of chartered status via the Campus Council charter review process.

C. Safety

- Each competitive chartered club sport (e.g., Cricket, Ultimate Frisbee, Quidditch) will be required to have a standard first aid kit that will travel with the team to every practice and competition.

- While there are not trainers available in the Scot Center through The Athletic Department for care beyond basic first aid, students can go to any of the locations listed below. Students must call Security and Protective Services (see separate Contact List document located on CC Wiki page), if necessary, for transportation. SPS must notify the Dean on Call.
• An Accident/Injury/Incident Report form must be filled out by the injured person or team captain, if they are unable to self-report, and submitted within 48 hours to Lowry Center and Student Activities for all members who are injured during a practice or competition, or any club-related activity both on and off-campus. This form can be found in the documents section of this manual on page 26. In addition, any club sports member that does incur an injury is also required to report the injury to their advisor.
• If medical treatment was sought for an injury sustained during a Club Sports activity, a release from Longbrake Wellness Center giving clearance to resume participation must be obtained to return to play in any club sport activity such as practice, competitions or games.
• Failure to comply with health and safety standards, reporting of injuries, and documentation of medical clearance following an injury that required medical care may result in redacted funding from Budget Committee and/or loss of chartered status via the Campus Council charter review process.
• If there are unsafe conditions for activity participation, the club sport must report to Lowry Center and Student Activities and Athletics for on campus instances and to Lowry Center and Student Activities for off campus instances.

1) Longbrake Student Wellness Center  
https://www.wooster.edu/students/health/  
E Wayne Ave,  
Wooster, OH 44691  
(330) 263-2319

2) Wooster Community Hospital  
https://www.woosterhospital.org/  
1761 Beall Ave.  
Wooster, OH 44691  
330-263-8100

3) Health Point (Wooster Community Hospital)  
https://www.woosterhospital.org/  
3727 Friendsville Rd.  
Wooster, OH 44691  
330-202-3300

4) Cleveland Clinic Wooster  
http://my.clevelandclinic.org/locations_directions/Regional-Locations/wooster-fhsc  
Wooster Family Health and Surgery Centers:  
  4a) Family Health Center & Express Care Clinic  
  1740 Cleveland Rd.  
  Wooster, OH 44691  
  330-287-4500

  4b) Specialty and Surgery Center  
  721 E. Milltown Rd.  
  Wooster, OH 44691  
  330-287-4500

5) Wooster Orthopedics and Sports Medicine Center
D. Inclement Weather

All outdoor events should operate under the best practices that are highlighted in the following section. It is the responsibility of the event organizers/club members to adhere to the following guidelines and charts to determine the best course of action recommended for your event.

- All outdoor participation is to be stopped immediately in the event of lightning or thunder, or if lightning is reported within 10 miles of your location. All participants will be instructed to immediately take shelter under cover in the nearest safe area. Ideally, this should be a completely enclosed area within a well-constructed building. It is extremely important that you plan ahead and know where the nearest safe area is located. It is well documented that thunder is the result of atmospheric disturbance caused by lightning; therefore if thunder is observed, lightning is occurring.
- Participants will be allowed to resume outdoor activities when no lightning or thunder has been observed for at least 30 minutes. Any subsequent lightning or thunder will automatically restart the clock. Many victims of lightning strikes are injured or killed when they return to the outside too quickly after "the storm has passed" and are struck by lightning from the trailing edge of the storm.
- Club and organization activities should be canceled if The College of Wooster Athletic Department cancels varsity sports, in cases of extreme heat or cold, when improper field conditions exist and in accordance with any regional or national association standards.
- These guidelines are to be followed during all practices, contests, sports camps, or any other outdoor activities using College of Wooster Facilities.

Wind-Chill Temperature Guidelines/Adjustment

<table>
<thead>
<tr>
<th>Temperature Range</th>
<th>Adjustments</th>
</tr>
</thead>
</table>
| 30°F - 25°F       | - Be aware and ready for possibility of cold injuries  
                   - Total exposure time: maximum of 2 hours |
| 25°F - 15°F       | - Cover exposed skin  
                   - **Offer re-warming: every 20 min** |
| 15°F - 0°F        | - Considering limiting modifying activity to limit exposure  
                   - **Offer re-warming: every 15 min**  
                   - **Total exposure time: maximum of 60 minutes** |
| < 0°F             | - **Cancel practice, reschedule or move indoors** |

Recognizing early signs of cold-induced stress may prove to be important in preventing cold weather-related injuries. The following signs and symptoms are considered to be early warning signs:

- shivering
- abnormal sensation at the distal extremities (e.g. numbness, pain, or burning sensation)
- disorientation
- slurred speech
Hot Weather Guidelines

<table>
<thead>
<tr>
<th>Temperature zone</th>
<th>Guidelines/adjustment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Risk Zone (WBGT &lt; 65°F)</td>
<td>- Perform activity as planned</td>
</tr>
<tr>
<td></td>
<td>- Include fluid breaks every 20-30 minutes of practice</td>
</tr>
<tr>
<td>Moderate Risk Zone (65°F &lt; WBGT &lt; 75°F)</td>
<td>- Include fluid breaks every 15-20 minutes of practice</td>
</tr>
<tr>
<td>High Risk Zone (WBGT &gt; 75°F)</td>
<td>- Consider delaying/canceling/rescheduling activity</td>
</tr>
<tr>
<td></td>
<td>- If applicable, no protective equipment may be worn</td>
</tr>
</tbody>
</table>

The Wet Bulb Globe Temperature (WBGT) is a composite temperature used to estimate the effect of temperature and humidity on humans.

E. Code of Conduct

Every member of the organization must abide by all policies and procedures outlined in the Scots' Key at all times. No alcohol and/or illegal drug use is permitted while participating in any aspect of the club sport, including practice, play, and travel. If a member is found to be violating the Scots' Key and/or other College policy, disciplinary actions will occur for the individual and the club sport. Use of illegal drugs on or off-campus is not permitted. Members of a group that are of legal drinking age may consume alcohol, but if a member has consumed alcohol within 24 hours of a club sport event and arrives under the influence of alcohol to any club sport activity, they will be dismissed from the activity.

Any captains or executive board members must enforce proper conduct and participants that observe such conduct should report to captains and/or executive board members. Inappropriate behavior consists of but is not limited to: aggressive actions, drug/alcohol abuse during organization activities, unwanted physical contact, verbal or online harassment, behavior not consistent with the values of the Wooster Ethic, etc. Any students with complaints about any of the above listed misdemeanors should contact the Director of Lowry Center and Student Activities or their organization’s advisor to determine appropriate action. Adhering to the policies laid out in the Scot’s Key is not limited to drug and alcohol use, and all those participating in a club sport should have a full understanding of all other policies, as well as policies laid out by the Campus Council Club Sports Committee. Failure to adhere to policy can lead to on-campus judicial action or official sanctions against the individual or the organization as a whole through the College’s conduct process.
IV. Equipment

Club sport organizations, like all other student organizations, will not be able to use any funds in the organization's account in the next academic year unless an inventory of all items currently owned by the organization is submitted to the Lowry Center and Student Activities office. The Equipment Log is available in Section VIII. This is according to Campus Council policy. Please make sure to budget for potential damages to equipment.

All Club Sports organizations are required to have a first aid kit. If the Club Sport does not already have one, contact staff in Lowry Center and Student Activities immediately. First aid kits are mandatory at all of practices and games and will be purchased for your organization by Campus Council.

V. Travel and Transportation

All drivers and driving activity for club sport organizations must meet or exceed The College of Wooster Vehicle Policy. **Failure to comply with this requirement will result in the immediate suspension of club activities and review of charter by Campus Council.**

Club sport organizations are required to file a detailed travel itinerary with the Lowry Center and Student Activities office at least two weeks before the time of travel, outlining the route to be taken, the final destination, any possible stops, and place of stay at the final destination. A list of all members traveling along with their emergency contact information for each person traveling must be turned into The Lowry Center and Student Activities Office one week before departure. A copy of the roster and emergency contact information should travel with the organization, to be kept by the team leader in case of emergency. These forms can be found in the documents section.

Club Sports are required to use college rental cars for traveling to off-campus locations that are more than an hour and a half away. To rent a vehicle through the College of Wooster, one must complete the online Driver's Safety Course. Students should contact Transportation Services to receive access to the online training. Once one has passed the online training, vehicles can be reserved through the Transportation Office. Reservations should be made to rent vehicles at least two weeks in advance of the event, if possible. If personal vehicles are being used, the students should make sure that all personal vehicle insurance is in order and that the vehicles are safe to drive for the distance required of them. If personal vehicles are being used, a signed statement ensuring the existence and validity of personal car insurance must be provided to Lowry Center and Student Activities prior to travel. Students should be in consultation with Lowry Center and Student Activities, Dean of Students, and SPS to determine if travel needs to be canceled due to inclement weather or the threat of inclement weather. Trailers may not be used.

VI. Finances

Club sport organizations must adhere to general budget guidelines set for student organizations by Campus Council.

A Club Sport organization may collect dues from its members to fund a part of its practice and other expenses that are not paid for by the Student Activity Fee. The amount is up to the discretion of the organization itself, but they are encouraged to maintain economic fairness and accommodate individual needs in order to facilitate accessibility within the club sport. These funds are to be deposited into the club’s on-campus self-generated account that can be accessed by contacting staff from Lowry Center and Student Activities Office.

A Club Sport may not keep funds off campus at banks or in personal accounts. If such accounts are found to exist, an organization’s charter may be revoked.
VII. Field and Facility

If a recognized College of Wooster club sport team intends to use any College of Wooster field or facility, they must reserve the space through the college’s scheduling software no less than 2 weeks before the event.

If a recognized College of Wooster club sport team intends to host any other club sport team for a competition or game, they must contact a staff in Lowry Center and Student Activities and meet with them no less than two weeks before the event to secure liability waivers for the visiting teams and their participants.

When an organization is looking to reserve a space it is strongly encouraged they contact the Lowry Center and Student Activities office two weeks in advance with their Outdoor Request completed; however, this still does not guarantee any organization ideal practice times or space. Field/Facility Priority List:

1. In-season varsity teams
2. Out-of-season varsity teams
3. Intramural sports
4. Club Sports teams

For Policies and rules of the Scot Center please see:
http://www.woosterathletics.com/scotcenter/guidelines

Inclement weather can force changes in field or facility schedule which may alter scheduled club practices/competitions. In those instances, the Field/Facility Priority list will be followed. Fields/Facilities MUST be cleared of any equipment (balls, goals, nets pulled back, etc.) at the end of the practice/competition.

The Athletic Department will not store any additional equipment that belongs to club sports. If the club sport needs campus storage for their equipment they can work with the Lowry Center and Student Activities Office to find such a space.

VIII. Coaches

Any coaches contracted by the College are considered independent contractors, unless they are employed in some other capacity by the College. Therefore, coaches are not employees of the College and are not permitted to drive vehicles rented through the institution. Payment to coaches may be used to assist in covering expenses associated with the position (i.e., travel, registration, equipment). If a team has a coach they must be certified in CPR, First Aid, Concussion training, and Bloodborne Pathogen Training and must provide copies of certification with their signed contract annually. Coaches do not, however, count in the 20% (or four members) required to have training (Section III.B). Fully executed service contracts for coaches must be completed prior to the start of the season. Contracts are initiated by the completion and submission of a Request for Contract Form to staff in Lowry Center and Student Activities. Coaches are paid monthly unless a separate agreement has been made between the coach, students, and Lowry Center and Student Activities. Disbursement forms are required with the contract with a written statement by student leadership that the coach has fulfilled their obligations in order for payment to be processed. Coaches should not engage in illegal or inappropriate behavior with students or be under the influence of drugs or alcohol while performing duties. There should be little to no communication between coaches and students outside of the realm of the club sport.

***Failure to comply with the above guidelines may result in termination of the event, loss of field space, inability to reserve field space, and/or jeopardization of future reservations or club chartering.***

***All policies are subject to review by the Club Sports Committee***
IX. Required Documents

The College of Wooster Checklist for Club Sports

Required Student Organization Documents/Trainings

- The President and Treasurer must attend a required financial training the 3\textsuperscript{rd} and 4\textsuperscript{th} week of the fall semester
- One cabinet member must attend a required Club Sports Training when it is scheduled
- A required Student Organization Roster must be submitted electronically to the staff of Lowry Center and Student Activities by 5\textsuperscript{th} week of each semester
- Each team member must review the NCAA fact sheet and CDC’s return to play protocol then complete a Club Sport Student-Athlete Concussion Statement
- A completed Travel Participation Emergency Contact/Medical Information from each team member
- Proof of insurance for each team member
- A completed Waiver of liability from each team member

Required Travel Documents

- Send Student Organization Travel Itinerary to the designated staff member of Lowry Center and Student Activities one (1) week prior to departure.
- Send Organization Travel Roster to the designated staff member of Lowry Center and Student Activities one (1) week prior to departure.
- A Completed Student Drivers and Verification of CoW Driver Authorization form for all drivers.
  - If renting vehicles from the school, email Transportation Department the number of vehicles and names of drivers ten (10) business days before departure, and carbon copy (CC) the designated staff member from Lowry Center and Student Activities.
Emergency Contact/Medical Information

Complete this form once per academic year unless there are changes

In case of a medical emergency, call Security & Protective Services at (330) 287-3333 IMMEDIATELY and request that they contact the Dean on Call.

Name of Participant: ___________________________ Student ID #: ___________________________
Organization: __________________________________________________________

Two People to Contact in Case of Emergency

Name________________________________________         Name_________________________________________
Relationship__________________________________          Relationship____________________________________
Address______________________________________         Address________________________________________
City/State ____________________________________         City/State_______________________________________
Home Phone _________________________________          Home Phone_____________________________________
Work Phone__________________________________          Work Phone_____________________________________

Medical Information

Attach a photocopy of proof of insurance
Name of Participant as shown on insurance card __________________________________________________________
Insurance Company Name __________________________________________________________
Address of Insurance Company _______________________________________________________________________
Ins. Co. Phone ___________________________ Subscriber & Relation to You _____________________________
Group number ________________________________  ID number __________________________________________
Date of Birth __________________________________
Allergies________________________________________________________________________________________
 Serious Medical Conditions, Major Surgeries, Medical History We Should Know About
_________________________________________________________________________________________________
_________________________________________________________________________________________________

(Use the back of form for additional information)
Current Prescriptions, Dosages, and Prescribing Doctor
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Do you wear contact lenses?________

Primary Doctor          Dentist
Name_________________________ Name_________________________
Address_________________________ Address_________________________
City/State_________________________ City/State_________________________
Phone_________________________ Phone_________________________

A completed copy of this form for each participant must be left at the Lowry Center and Student Activities Office and one copy should be taken with the group leader. The group leader should also have a copy of each participant’s health insurance card. If they only have College insurance, request a copy of the necessary information from Longbrake Student Wellness Center.
The College of Wooster allows Participants to participate in certain Participant and club activities that are inherently dangerous in nature (“Activity”). As with any activity or program involving exposure, physical contact, physical exertion, bodies of water, heights, exposure to chemicals/hazardous materials, etc., certain risks are inherent to personal health, safety and/or property therewith. It is The College of Wooster’s policy that individuals will not be permitted to participate in the Activity unless he or she is willing to accept the associated inherent risks and execute this waiver of liability pertaining to those risks.

I, ____________________________ (“Participant”), (or on behalf of my minor child) hereby acknowledge that I have (or may during this Academic Year) voluntarily elected to participate in the “Activity”, ____________________________ (Activity) from ________________ (Academic Year). I acknowledge that my participation and use is elective and voluntary. I further hereby acknowledge that I have permission to use, today and during this Academic Year, The College of Wooster’s facilities and those facilities the club has specifically obtained permission from the institution to use for the Activity.

In consideration for being permitted by the College of Wooster to participate in the Activity which may include inherently dangerous activities that result in exposure, physical contact, physical exertion, bodies of water, heights, exposure to chemicals/hazardous materials, etc., certain risks are inherent to personal health, safety and/or property, I hereby acknowledge and agree to the following:

MANDATORY:

I, ____________________________ (“Participant”) (or on behalf of my minor child), hereby acknowledge that I am required to participate in the following course of study/activity at The College of Wooster, mandatory club sports trainings. I further hereby acknowledge that I have permission to use, today and during this Academic Year, The College of Wooster’s facilities and those facilities the club has specifically obtained permission from the institution to use for the Activity.

PROMOTIONAL RIGHTS: As a condition of my participation, I hereby grant The College of Wooster the right to use, for promotional purposes only, any photographs of me taken by The College of Wooster, its employees or agents, during my participation in the Activity. I further understand and agree that The College of Wooster may use (for marketing purposes) any statements or quotes attributed to me in my evaluation of the Activity.

RULES AND REQUIREMENTS: I agree to conduct myself in accordance with The College of Wooster’s policies and procedures, including The Scot’s Key which can be located on The College of Wooster’s website at the following link: https://www.wooster.edu/_media/files/students/dean/scotskey.pdf#search=scot%27s%20key. I further agree to abide by all the rules and requirements of the Activity that is outlined in the club sports manual https://www.wooster.edu/students/organizations/sports/ and the rules listed in The Scot’s Key.
acknowledge that The College of Wooster has the right to terminate my participation in the Activity if it is
determined that my conduct is detrimental to the best interests of the group, my conduct violates any rule of the
Activity, or at The College of Wooster’s discretion. Likewise, I acknowledge that The College of Wooster has
the right to terminate my use of its Facilities if it is determined that my conduct is detrimental to the Facilities or
others using the Facilities, my conduct violates any rule of the Facilities, or at The College of Wooster’s
discretion.

INFORMED CONSENT: I have been informed of and I understand the various aspects of the Activity and
use of the Facilities. I understand that as a Participant in the Activity and user of the Facilities, I will engage in
physical activities that involve or may involve inherently dangerous activities in which I could sustain
________________________ (List any unique risks), including but not limited to serious bodily injuries
including serious injury to virtually all bones, joints, muscles, and internal organs, cardiac problems, brain
damage, illness, damage, or even death as a consequence, and that protective equipment or preventative
measures may be inadequate to prevent serious injury. These serious personal injuries and possible death may
not only be a consequence of Releasees’ (as defined herein) actions, inactions, negligence or fault, but also the
actions, inactions, negligence or fault of others, conditions of equipment used, facility conditions, weather
conditions, negligent first aid operations and procedures, and other risks not known to me or not reasonably
foreseeable at this time. I further understand and agree that any injury, illness, damage, disability, or death that
I may sustain by any means is my sole responsibility, except as explicitly specified in this Agreement.

I further understand that the Activity in which I am participating involves or may involve inherently dangerous
activities in which I could sustain ________________________ (List any unique risks), including but not
limited to serious personal injuries including concussions, cardiac problems, illness, damage, or even death as a
consequence. These injuries may be the result of my own actions or inactions or those of others, conditions of
equipment used, facility conditions, weather conditions, negligent first aid operations and procedures, and other risks not known to me or not reasonably foreseeable at this time. I further acknowledge that I have read and
understand the NCAA Concussion Fact Sheet and am aware of the following information:

1. A concussion is a brain injury for which I am responsible for reporting to The College of Wooster’s health care
   provider.
2. A concussion can affect my ability to perform everyday activities, including reaction time, balance, sleep,
   concentration and classroom performance.
3. It is my responsibility to report to The College of Wooster’s health care provider if I receive a blow to the head or
   body and experience signs or symptoms of a concussion, which may include: headache, blurred vision, weakness in one
   arm or leg, loss of consciousness, stumbling, loss of balance, nausea/vomiting, confusion, memory loss, or change in
   personality (including irritability and depression). I will report this immediately or as soon as I am physically able to do
   so.
4. I may notice some symptoms of a concussion immediately, but other symptoms may show up hours or days after
   the initial injury. It is my responsibility to immediately report any delayed signs or symptoms to The College of
   Wooster’s health care provider.
5. If I suspect a participant has a concussion, I am responsible for immediately reporting the injury to The College of
   Wooster’s health care provider.
6. I will not return to play in the Activity if I have received a blow to the head or body that results in concussion-like
   symptoms until I am cleared by The College of Wooster’s health care provider.
7. Following a concussion, the brain needs time to heal. I am more likely to have a repeat concussion if I return to
   the Activity before my symptoms resolve. In rare cases, repeat concussions can cause permanent brain injury or death.
   Because of this, I understand it is important to immediately and accurately report my signs and/or symptoms if I have
   been diagnosed with a concussion.
I further understand that the Activity in which I am participating involves or may involve bodies of water/a swimming pool. I am aware that any contact with bodies of water/a swimming pool involves certain risks, including but not limited to: ________________________ (List any unique risks), death, drowning, or other personal injury as a result of the area’s conditions, the acts of third parties or other unknown safety hazards, diving injury, skin, eye, lung and ear irritation, injuries resulting from loss of balance and footing on aquatic surfaces, injuries resulting from lack of oxygen, injuries due to conditions of equipment, unpredictability of weather and the water conditions, wildlife, first aid operations or procedures of Releases (as defined herein) and/or others, and that there may be other risks not known to me or not reasonably foreseeable at this time.

**Risk provision for Participant activities that involve DOMESTIC OVERNIGHT TRAVEL and are NOT INHERENTLY DANGEROUS**

**ASSUMPTION OF RISKS:** I understand and acknowledge that there are potential dangers incidental to my participation in, and travel for, the Activity, including risks of damage, bodily injury, illness, disability, and possibly death as described throughout this Agreement. The risks may result from the acts of others, from use of transportation and overnight accommodations, or organization of or unavailability of emergency medical care. I understand that these potential risks include but are not limited to: travel to and from The College of Wooster by means of common carriers, vehicles owned by The College of Wooster, personal vehicles when permissible and/or local transportation to and from the ____________________________ (SPECIFY SITE), weather conditions, facility conditions, equipment conditions, negligent first aid operations or procedures of Releases (as defined herein), and that there may be other risks not known to me or not reasonably foreseeable at this time.

**I KNOWINGLY AND VOLUNTARILY ASSUME ALL SUCH RISKS, BOTH KNOWN AND UNKNOWN, EVEN IF ARISING FROM THE ACTS OF THE RELEASEES, UNLESS THE RISKS SOLELY ARISE FROM THE RELEASEES’ (AS DEFINED HEREIN) NEGLIGENCE, GROSS NEGLIGENCE OR INTENTIONAL MISCONDUCT** and I assume full responsibility for my participation in the Activity.

**Use this Assumption of Risk provision for Participant activities that include BOTH DOMESTIC OVERNIGHT TRAVEL AND INHERENTLY DANGEROUS ACTIVITIES**

**ASSUMPTION OF RISK:** I understand and acknowledge that there are potential dangers incidental to my participation in the Activity, including risks of damage, bodily injury and possibly death as described throughout this Agreement. The risks may result from the activity itself, from the acts of others, from use of the equipment, or organization of or unavailability of emergency medical care. I understand that there are risks attendant to physical activities associated with the Activity and that there are potential dangers which may expose me to the risk of personal injuries, damage, or even death. In addition, I understand that participation in the Activity involves activities incidental thereto, including, but not limited to, travel to and from the site of the Activity, overnight travel and accommodation, participation at sites that may be remote from available medical assistance, and the possible reckless conduct of other participants. I understand that these potential risks include, but are not limited to: travel to and from The College of Wooster by means of common carriers, vehicles owned by The College of Wooster, personal vehicles when permissible and/or local transportation to and from the ____________________________ (SPECIFY SITE), weather conditions, facility conditions, equipment conditions, negligent first aid operations or procedures of Releases (as defined herein) ________________________ (List any unique risks), and that there may be other risks not known to me or not reasonably foreseeable at this time.

**I KNOWINGLY AND VOLUNTARILY ASSUME ALL SUCH RISKS, BOTH KNOWN AND UNKNOWN, EVEN IF ARISING FROM THE ACTS OF THE RELEASEES, UNLESS THE RISKS ARISE SOLELY FROM THE RELEASEES’ NEGLIGENCE, GROSS NEGLIGENCE OR INTENTIONAL MISCONDUCT** and I assume full responsibility for my participation in the Activity and use of the Facilities.
RELEASE AND WAIVER OF LIABILITY: I, on behalf of myself, my personal representatives, heirs, executors, administrators, agents, and assigns, HEREBY RELEASE,

WAIVE, DISCHARGE, AND COVENANT NOT TO SUE The College of Wooster, including its governing board, trustees, directors, officers, employees, and any Participants, agents or volunteers acting at The College of Wooster’s direction (collectively referred to as "Releasees"), for any and all liability, including any and all claims, demands, causes of action (known or unknown), suits, or judgments of any and every kind (including attorneys' fees), arising from any injury, damage or death that I may suffer as a result of my participation in the Activity and use of the Facilities, REGARDLESS OF WHETHER THE INJURY, DAMAGE OR DEATH IS CAUSED BY THE RELEASEES, UNLESS THE INJURY DAMAGE OR DEATH IS CAUSED SOLELY BY THE RELEASEES' NEGLIGENCE OR GROSS NEGLIGENCE OR INTENTIONAL MISCONDUCT, AND REGARDLESS OF WHETHER THE INJURY DAMAGE OR DEATH OCCURS WHILE IN, ON, UPON, OR IN TRANSIT, INCLUDING OVERNIGHT STAY, TO OR FROM THE PREMISES WHERE THE ACTIVITY, OR ANY LOCATION ADJUNCT TO THE ACTIVITY, OCCURS OR IS BEING CONDUCTED.

I further agree that the Releasees are not in any way responsible for any injury or damage that I sustain as a result of my own negligent or grossly negligent acts or my own intentional misconduct and I hereby release Releasees from any liability for the same.

The College of Wooster expressly disclaims liability for actions of third parties, which includes but is not limited to Participants, agents or volunteers who are not acting under the direction and control of The College of Wooster. I, hereby release Releasees from any and all liability, including any and all claims, demands, causes of action (known or unknown), suits, or judgments of any and every kind (including attorneys' fees), arising from any injury, damage or death that I may suffer as a result of actions of any third parties who are not Releasees.

INDEMNITY: I, on behalf of myself, my personal representatives, heirs, executors, administrators, agents, and assigns, agree to hold harmless the Releasees from any and all liability, including any and all claims, demands, causes of action (known or unknown), suits, or judgments of any and every kind (including attorneys' fees), arising from any injury, damage or death that I may suffer as a result of my participation in the Activity and/or use of the Facilities, REGARDLESS OF WHETHER THE INJURY, DAMAGE OR DEATH IS CAUSED BY THE RELEASEES OR OTHERWISE, UNLESS THE INJURY, DAMAGE OR DEATH IS SOLELY CAUSED BY THE RELEASEES' NEGLIGENCE, GROSS NEGLIGENCE OR INTENTIONAL MISCONDUCT.

I further agree that, in the event that I or any of my family members, personal representatives, heirs, executors, administrators, agents, assigns or any other third party attempts to assert any claims, demands, causes of action (known or unknown), suits, or judgments of any and every kind (including attorneys' fees), arising from any injury, damage or death to me, including but not limited to any injury resulting from my own negligence, gross negligence or intentional misconduct during or related to the Activity, I AGREE TO DEFEND AND INDEMNIFY RELEASEES AGAINST SUCH CLAIMS, DEMANDS, CAUSES OF ACTION (KNOWN OR UNKNOWN), SUITS, AND/OR JUDGMENTS OF ANY AND EVERY KIND (INCLUDING ATTORNEYS' FEES) TO THE FULLEST EXTENT PERMITTED BY LAW.

PERSONAL MEDICAL INSURANCE: I further acknowledge that I am responsible for the cost of any and all medical and health services I may require while participating in the Activity except for medical costs arising from an injury that I sustain that is the direct result of Releasees’ negligence or gross negligence or intentional misconduct. I understand and agree that Releasees shall not in any way be responsible for other contingent losses arising from any injury I sustain that is not the result of Releasees’ negligence, gross negligence or intentional misconduct.
CERTIFICATION OF FITNESS TO PARTICIPATE: I attest that I am physically and mentally fit to participate in the Activity and that I do not have any medical record of history that could be aggravated by my participation in the Activity. I further attest that I am physically and mentally fit to participate in the Activity, and that I am responsible for consulting with my health care provider towards this end.

RESPONSIBILITY FOR REPORTING INJURIES: I acknowledge that I must be an active participant in my own healthcare and as such, it is my responsibility to report all injuries and illnesses, including signs and symptoms of concussions, to The College of Wooster’s qualified health care provider. I hereby affirm that I have fully disclosed in writing any prior medical conditions and will also disclose any future conditions to The College of Wooster’s health care provider.

MEDICAL CONSENT: I understand and agree that Releasees may not have medical personnel available at the location of the Activity, nor at the Facilities. In the event of any medical emergency, I (initial one) do____/do not____ authorize and consent to any x-ray examination, anesthetic, medical, dental or surgical diagnosis or treatment and hospital care that The College of Wooster personnel deem necessary for my safety and protection. I understand and agree that Releasees assume no responsibility for any injury or damage which might arise out of or in connection with such authorized emergency medical treatment. I further understand that in the event that I experience any condition requiring emergency medical treatment, The College of Wooster may direct that I be transported to the hospital for such care.¹

NON-EMPLOYEE STATUS: I understand and acknowledge that in participating in the Activity, I am doing so independently and that I am not an employee or agent of The College of Wooster. I understand and agree that as a non-employee that I am not entitled to receive compensation or any other employee benefit from The College of Wooster for my participation in the Activity.

MULTIPLE OCCURRENCES: If this Activity involves multiple occurrences, those multiple occurrences are outlined in the Student Organization Travel Itinerary found at the following link: https://www.wooster.edu/_media/files/students/organizations/resources/club-sports-travel.pdf. This waiver shall be applicable to any and all such occurrences.

CHOICE OF LAW: I hereby agree that this Agreement shall be construed in accordance with the laws of the State of Ohio.

SEVERABILITY: If any term or provision of this Agreement shall be held illegal, unenforceable, or in conflict with any law governing this Agreement the validity of the remaining portions shall not be affected thereby.

I hereby acknowledge that I have read, understand and will abide by each of the terms and conditions of this Agreement. I understand that I may seek legal counsel of my own choosing to fully explain any terms of this Agreement to me before I sign it.

¹[NOTE: In the event that a Participant expressly declines medical treatment on the waiver, an officer at the institution should immediately have a conversation with the Participant to ensure that the Participant fully understands the risks of declining medical treatment. The Participant should also be informed that if he or she reasonably appears to be experiencing an emergency medical condition, the institution will transport the Participant to the hospital. In the event that a Participant who has declined medical treatment experiences an injury or medical condition that appears to require emergency treatment, the institution should transport the Participant to the hospital’s emergency room. Such transportation is authorized under the federal Emergency Medical Treatment and Active Labor Act (EMTALA), which mandates medical screening examination and treatment for all patients presenting to an emergency department with an emergency medical condition. Neither parental nor patient consent may be needed for such care. Moreover, once the Participant is at the hospital, the institution should ensure that the examining health care provider (not the institution) fully explains the risks of not proceeding with treatment to the Participant. The treating physician should also document the Participant’s refusal of medical treatment in writing. If the Participant is comatose and unable to decline medical treatment but previously declined medical treatment in his or her waiver, he or she should also be transported to the emergency room.]
Signature of Parent/Guardian for Participants Who Are Minors:

I certify that I have custody of Participant or am the legal guardian of Participant by court order. I HAVE READ THIS AGREEMENT AND FULLY UNDERSTAND AND AGREE TO ITS TERMS. I AM AWARE THAT THIS AGREEMENT INCLUDES A RELEASE AND WAIVER OF LIABILITY, AN ASSUMPTION OF RISK, AND AN AGREEMENT TO INDEMNIFY RELEASEES.

Date: ________________________  __________________________________________
(Signature of Parent or Guardian)

__________________________________________
(Printed Name of Parent or Guardian)

Received by:

Date: ________________________  __________________________________________
(Signature)

__________________________________________
(Printed Name of Institution Official)
CONCUSSION
A FACT SHEET FOR STUDENT-ATHLETES

WHAT IS A CONCUSSION?
A concussion is a brain injury that:
- Is caused by a blow to the head or body.
  - From contact with another player, hitting a hard surface such as the ground, ice or floor, or being hit by a piece of equipment such as a bat, lacrosse stick or field hockey ball.
- Can change the way your brain normally works.
- Can range from mild to severe.
- Presents itself differently for each athlete.
- Can occur during practice or competition in ANY sport.
- Can happen even if you do not lose consciousness.

HOW CAN I PREVENT A CONCUSSION?
Basic steps you can take to protect yourself from concussion:
- Do not initiate contact with your head or helmet. You can still get a concussion if you are wearing a helmet.
- Avoid striking an opponent in the head. Undercutting, flying elbows, stepping on a head, checking an unprotected opponent, and stick to the head all cause concussions.
- Follow your athletics department's rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.
- Practice and perfect the skills of the sport.

WHAT ARE THE SYMPTOMS OF A CONCUSSION?
You can't see a concussion, but you might notice some of the symptoms right away. Other symptoms can show up hours or days after the injury. Concussion symptoms include:
- Amnesia.
- Confusion.
- Headache.
- Loss of consciousness.
- Balance problems or dizziness.
- Double or fuzzy vision.
- Sensitivity to light or noise.
- Nausea (feeling that you might vomit).
- Feeling sluggish, foggy or groggy.
- Feeling unusually irritable.
- Concentration or memory problems (forgetting game plays, facts, meeting times).
- Slowed reaction time.

Exercise or activities that involve a lot of concentration, such as studying, working on the computer, or playing video games may cause concussion symptoms (such as headache or tiredness) to reappear or get worse.

WHAT SHOULD I DO IF I THINK I HAVE A CONCUSSION?
Don't hide it. Tell your athletic trainer and coach. Never ignore a blow to the head. Also, tell your athletic trainer and coach if one of your teammates might have a concussion. Sports have injury timeouts and player substitutions so that you can get checked out.

Report it. Do not return to participation in a game, practice or other activity with symptoms. The sooner you get checked out, the sooner you may be able to return to play.

Get checked out. Your team physician, athletic trainer, or health care professional can tell you if you have had a concussion and when you are cleared to return to play. A concussion can affect your ability to perform everyday activities, your reaction time, balance, sleep and classroom performance.

Take time to recover. If you have had a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have a repeat concussion. In rare cases, repeat concussions can cause permanent brain damage, and even death. Severe brain injury can change your whole life.

IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON. WHEN IN DOUBT, GET CHECKED OUT.
For more information and resources, visit www.NCAA.org/health-safety and www.CDC.gov/Concussion.

Reference to any commercial entity or product or service on this page should not be construed as an endorsement by the Government of the company or its products or services.

Return to Play Progression

There are five gradual steps to help safely return an athlete to play:

**Baseline: No Symptoms**
As the baseline step of the Return to Play Progression, the athlete needs to have completed physical and cognitive rest and not be experiencing concussion symptoms for a minimum of 24 hours. *Keep in mind, the younger the athlete, the more conservative the treatment."

**Step 1: Light aerobic activity**
The Goal: Only to increase an athlete’s heart rate.
The Time: 5 to 10 minutes.
The Activities: Exercise bike, walking, or light jogging.
Absolutely no weight lifting, jumping or hard running.

**Step 2: Moderate activity**
The Goal: Limited body and head movement.
The Time: Reduced from typical routine.
The Activities: Moderate jogging, brief running, moderate-intensity stationary biking, and moderate-intensity weightlifting.

**Step 3: Heavy, non-contact activity**
The Goal: More intense but non-contact
The Time: Close to typical routine
The Activities: Running, high-intensity stationary biking, the player’s regular weightlifting routine, and non-contact sport-specific drills. This stage may add some cognitive component to practice in addition to the aerobic and movement components introduced in Steps 1 and 2.

**Step 4: Practice & full contact**
The Goal: Reintegrate in full contact practice.

**Step 5: Competition**
The Goal: Return to competition.
It is important to monitor symptoms and cognitive function carefully during each increase of exertion. Athletes should only progress to the next level of exertion if they are not experiencing symptoms at the current level. If symptoms return at any step, an athlete should stop these activities as this may be a sign the athlete is pushing too hard. Only after additional rest, when the athlete is once again not experiencing symptoms for a minimum of 24 hours, should he or she start again at the previous step during which symptoms were experienced.

The Return to Play Progression process is best conducted through a team approach and by a health professional who knows the athlete’s physical abilities and endurance. By gauging the athlete’s performance on each individual step, a health care professional will be able to determine how far to progress the athlete on a given day. In some cases, the athlete may be able to work through one step in a single day, while in other cases it may take several days to work through an individual step. It may take several weeks to months to work through the entire 5-step progression.
Club Sports Member Injury, Illness and Concussion Reporting Acknowledgement Form

☐ I understand that it is my responsibility to report all injuries and illnesses to my athletic trainer and/or team physician.

☐ I have read and understand the NCAA Concussion Fact Sheet

After reading the NCAA Concussion fact sheet, I am aware of the following information:

_____ A Concussion is a brain injury, which I am responsible for reporting to my team physician or athletic trainer.

_____ A concussion can affect my ability to perform everyday activities, and affect reaction time, balance, sleep, and classroom performance.

_____ You cannot see a concussion, but you might notice some of the symptoms right away. Other symptoms can show up hours or days after the injury.

_____ If I suspect a teammate has a concussion, I am responsible for reporting the injury to my team physician or athletic trainer.

_____ I will not return to play in a game or practice if I have received a blow to the head or body that results in concussion-related symptoms.

_____ Following a concussion the brain needs time to heal. You are much more likely to have a repeat concussion if you return to play before your symptoms resolve.

_____ In rare cases, repeat concussions can cause permanent brain damage, and even death.

_________________________________   _____________
Signature of Member                Date

_________________________________
Printed name of Member
Club Sports Mid-Year/Annual Report

Name of Organization: _________________________________ Date Submitted: _____________

Name of Person Filing Report: __________________________________________________________

I. Membership Roster:
Attach a roster of members with the following information
1. NAME
2. CLASS YEAR
3. POSITION IN ORGANIZATION (i.e., President, Treasurer, Team Captain, General Member)
4. CONTACT INFORMATION

III. PARTICIPATION

1. ___________ x ___________ = ___________
   # of club meetings average # of participants Total
2. ___________ x ___________ = ___________
   # of club practices average # of participants Total
3. ___________ x ___________ = ___________
   # of competitions average # of participants Total
4. ___________ x ___________ = ___________
   # of non-competitive events average # of participants Total

III. REGULAR SEASON RESULTS
(Record number for each)

WON_____ LOST _____ TIED _____

IV. TOURNAMENT RESULTS
(Record the events you've attended, your final ranking at the event, and other teams involved)

V. COMPETITION/CLINICS ATTENDED
(Record number for each)
Hosted at HOME _____  Attended AWAY _____

VI. LIST FUNDRAISERS AND AMOUNT RAISED:

VII. EVENTS HELD FOR COMMUNITY BENEFIT:

VIII. CLUB GOALS FOR NEXT YEAR
1. 
2. 
3. 

IX. SPECIAL CLUB ACCOMPLISHMENTS

X. SPECIAL MEMBER ACCOMPLISHMENTS

XI. ADVANCEMENT TESTING (Martial Arts Club members)
Number of club members who have tested and advanced to the next skill level
Please attach list of names and to what level they advanced.

XII. LIST OF OUTSIDE CLUB AFFILIATIONS
1. NATIONAL _________________________
2. REGIONAL _________________________
3. STATE _________________________
XIII. TRAININGS
Names and box numbers of club members who have completed trainings and organizations that those administered trainings (if by College of Wooster please identify as such).

XIV. SUPPLEMENTARY QUESTIONS
What facilities did the club use on a regular basis or part-time basis?

When were practice times?

When and where did the club meet other than for practices or games?

Report form adapted from model used by Marquette University.
Injury Plan

Submit form to the Lowry Center and Student Activities Office one (1) week before your first competition

Name of Club: __________________________ Date of last revision: ________________

Name of Person Filing Plan: __________________________

I. What are your most common injuries?

II. How does your organization plan to mitigate the risk of injury and what action will you take if an injury occurs?

III. Does the mother organization of your club sport have safety standards and where are they located?

IV. Does your mother organization require any safety equipment and/or what equipment does your club require your students to wear to mitigate the most common injuries?
College of Wooster Injury Report

The injured student or travel participant should fill out this form.

Call Security & Protective Services at (330) 287-3333 IMMEDIATELY if medical attention is sought and request that they contact the Dean on Call.

Submit this form to the Lowry Center and Student Activities Office within 48 hours of the incident

Name of Participant:_____________________________________________________________________
Name of Organizations:_________________________________________________________________
Location that Injury was sustained:_________________________________________ Date:____________
CoW ID Number: _____________________________ Date of Birth: _____/____/____
Phone Number: (_____) ___________________________ Campus Mailbox Number: ___________
Witness(es): ___________________________________________________________________

Description of Accident: Please describe how the accident happened. What you were doing at the time of the injury? List any specific acts by individuals or conditions that led to the accident. Include any tools, machinery, instruments, etc. involved). Use the back of this form if more space if needed.

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<th>NATURE OF INJURY</th>
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<td>Other (Specify):</td>
<td>_ Knee</td>
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Did you go to the hospital/doctor? Y N

What hospital/doctor? ______________________________________________

______________________________________________
Signed by Injured Party Date
Student Organization Travel Itinerary

Name of Organization: __________________________________________________________________

Student Travel Leader/Coordinator: ____________________________ Cell: (  ) ____________________

Staff/Faculty Travel Advisor: _________________________________ Cell: (  ) ____________________

Departure Date: __________________________ Time: __________________________

Return Date: __________________________ Anticipated Time: _________________

Purpose of Travel: ______________________________________________________________________

Means of Transportation (e.g., College Rental Vans/Cars, Buses, Personal Cars):

Name of Accommodations: _______________________________________________________________________

Address: __________________________________________________________________________________

City: _______________ State: _______________ Zip Code: ________________

Phone: ________________________________

Local Police Department (where you will be staying) address: ____________________________________________

Local Police Department (where you will be staying) phone number: _________________________________________

Please list other phone number(s) at which your organization can be reached in case of emergency.

Name: __________________________ Telephone: (  ) ____________________

Name: __________________________ Telephone: (  ) ____________________

Name: __________________________ Telephone: (  ) ____________________

Name: __________________________ Telephone: (  ) ____________________

Name: __________________________ Telephone: (  ) ____________________
# Student Drivers and Verification of CoW Driver Authorization

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Student Organization Travel Roster

Attach Travel Roster with Emergency Contacts and submit all forms to the Lowry Center and Student Activities Office one (1) week prior to event.

Organization: _________________________________________________________________

Date(s) of Travel: ______________________________________________________________

Name of Travel Supervisor: _____________________________________________________

Cell Phone Number of Travel Supervisor: (____) ________________________________

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<thead>
<tr>
<th>Name</th>
<th>CoW ID Number</th>
<th>Cell Phone Number</th>
<th>Date of Birth</th>
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## Equipment Log

Organization Name: ___________________________________________ Date: __________________
Person(s) responsible for equipment: ___________________________________________

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<thead>
<tr>
<th>Equipment Piece</th>
<th>Quantity</th>
<th>Condition (Good/Fair/Damaged)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: Frisbees</td>
<td>18</td>
<td>Good</td>
</tr>
<tr>
<td>Example: Frisbees</td>
<td>2</td>
<td>Damaged</td>
</tr>
</tbody>
</table>

***Return Equipment Log to the Lowry Center and Student Activities Office by the second week of each semester.***
A good coach can be a valuable asset to a club sport in terms of providing mature judgment and advice based on experience and insight into the club’s sport, league and community. Ideally, the coach(es) can help provide this leadership without usurping the authority of the student leadership. The primary goal of clubs is always on student development, therefore, the coach(es) should encourage this and allow students to make their own decisions with the guidance of the coach(es).

**Coaching Expectations:**

1. The coach should play an active role in the on-field decisions of the club sport.
2. The coach will provide guidance in the development of leadership and responsibility of the club sport members.
3. The coach will provide guidance to the club sport team in ensuring that all club activities are within The College of Wooster, league and governing body guidelines. The coach should not take a leadership role or make decisions on behalf of the club.
4. Student members MUST handle all club business matters (hosting tournaments, submitting forms, equipment requests) with the coach serving in an advisory capacity.
5. The coach may not submit any documents on behalf of the club. When representing the club in any capacity (marketing, fundraising, scheduling, etc.), a coach must always be accompanied by a student member of the club.
6. Coach(es) serve at the discretion of the club executives. Any decisions to hire a new coach or remove a coach from their position must be discussed with and approved by Lowry Center and Student Activities staff, in conjunction with the club executives.
7. Coaches are required to provide an organized and safe environment for the instruction and training for participants of various skill levels. The safety and welfare of the participants should always take precedence over the value of a win.
8. Coaches must promote good sportsmanship at all times. Individuals must always conduct themselves in a manner that does not detract from the reputation of The College of Wooster and in accordance with the Scot's Key. This includes behavior in game situations, contact with other teams and interaction with event staff. When involved in off-campus events or when traveling, be aware that you are representing The College of Wooster.

9. All coaches will be held accountable for the conduct of their players. Coaches have a responsibility to address any misconduct and/or unsportsmanlike behavior. Coaches are required to immediately notify staff in Lowry Center and Student Activities (studentactivities@wooster.edu) of any situation that may violate the Scot's Key, Club Sports Club Sports Manual.

10. The coach/instructor understands and agrees to refrain from any form of physical, mental, or emotional hazing of players, consistent with the guidelines and standards set by The College of Wooster.

11. Participation in the Club Sport Program is completely voluntary, therefore monetary rewards or scholarships shall not be promised or given to any player or prospective player.

Conditions of Service:

1. The coach agrees to abide by all rules and policies of The College of Wooster, the Club Sports program, the employing club, sport specific national governing bodies and state and federal laws. Violation of any such rules, polices or procedures may be grounds for immediate termination of this agreement at the sole discretion of The College of Wooster.

2. All coaches are required to attend any mandatory training session(s).

3. It is recommended that all coaches purchase their own personal medical/liability insurance at their own expense.

4. Coaches shall not make any demands on a participant that are inconsistent with the guidelines of the competitive sports program or in any way compromise the participant’s academic pursuits.

5. No coach shall be permitted to have his/her name on club accounts or have access to said accounts. Clubs must keep all funds in a College of Wooster account. The use of all funds must be initiated by the club’s executive board by contacting the Lowry Center and Student Activities office before any purchase may be made.

6. Coaches will not engage in inappropriate relationships with club members.

7. All coaches serve at the discretion of the club’s officers with the oversight of The Lowry Center and Student Activities staff. Lowry Center and Student Activities Staff has the right and obligation to protect the Club, and if, in the staff's opinion, the coach is not working in the best interests of the Club, the coach can be relieved of his/her coaching duties.

8. Lowry Center and Student Activities staff reserves the right to suspend club activities should club officers fail to comply with policies.

9. All coaches are encouraged to maintain a valid American Red Cross First Aid/CPR/AED Certification. Certification courses will be held FREE through The College of Wooster.

I have read and understand the "Coaching Expectations and Conditions of Service" as outlined above and agree to abide by the rules as listed. I understand that any infraction of the policies and procedures of Scot's Key subjects me to dismissal as coach of the club.

________________________________________________________________         _____________________________
Signature of Coach                                                                                                           Date

________________________________________________________________         _____________________________
Signature of Club President              Date

________________________________________________________________         _____________________________
Signature of Lowry Center and Student Activities Staff                                                  Date