

## CHECKLIST

You must turn in the following to SLP in order to be a registered WIT Club Sport. This checklist is to assist you in making sure you remembered everything.

- Coach or Advisor Information Form
- Membership Roster Form
- Waiver Form Information Sheet
- Waiver Form for Each Member                      Total: \_\_\_\_\_
- Doctor Clearance Letter for each Member   Total: \_\_\_\_\_
- First Aid Kit Requirements Sheet
- Emergency Contact Information Sheet (also goes in the first aid kit)
- Practice, Scrimmage, and Game Schedule (a copy)

**Club Sport Coach Information Form  
Wentworth Institute of Technology**

*All club sports are required to have a coach. This person should always be present during practices, scrimmages, games and other activities of the club. This person is responsible for exercising judgment in situations that require a decision, most notably emergencies. This person should follow the Off-Campus Incident Protocol.*

Name of Club Sport: \_\_\_\_\_

Name of Coach: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Relationship to the Institute (circle one): Staff Faculty Alumni PaidCoach Other \_\_\_\_\_

Certifications (circle all that apply and provide dates of certification):

CPR            Basic First Aid            Medically Trained            Certified Coach            Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sign-off on Required Components for Club Sports (please initial each):

1. The students and I have received and have read the Student Organization Manual and agree to adhere to all policies and procedures set forth therein. \_\_\_\_\_
2. I am aware that all students involved in this Club Sport have received, read, and signed waiver forms for their participation for the season. \_\_\_\_\_
3. I have seen the first aid kit that this Club Sports Team possesses and agree it is adequate.  
\_\_\_\_\_
4. I have signed the membership roster sheet. \_\_\_\_\_
5. I understand I am responsible for adhering to the Off-Campus Incident Protocol

By filling out this form, I agree that I am the Coach for the \_\_\_\_\_ at Wentworth Institute of Technology. I have spoken to the President and/or Captains for the Club that I work with and we have discussed the importance of the above information and equipment and requirements. I realize that it will be necessary on occasion for me to make decisions regarding the well being of WIT students during participation in the Club Sport. I have read the Student Organization Manual and will adhere to the policies and procedures set forth by WIT.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Club Sports Membership Roster Form**  
**Wentworth Institute of Technology**

*(This form should also be sent electronically (excel) to your SLP Advisor and Coach)*

Name of Club Sport: \_\_\_\_\_

*Executive Board:*

President/Captain: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Duties (list at least 3 major duties of this person): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Vice President: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Duties (list at least 3 major duties of this person): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Secretary: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Duties (list at least 3 major duties of this person): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Treasurer: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Duties (list at least 3 major duties of this person): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other \_\_\_\_\_: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Duties (list at least 3 major duties of this person): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other: \_\_\_\_\_: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Duties (list at least 3 major duties of this person): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Advisor/Coach: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Duties (list at least 3 major duties of this person): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**Agreement Form Information for Club Sports  
Wentworth Institute of Technology**

Each club sport must collect waiver forms from each participant before they may participate in any practice, scrimmage, or game. If your sport has a specific waiver form that is used nationally by an accredited association, you may use that form, but it must be in addition to the Wentworth agreement form attached here.

Forms must be filed in Student Leadership Programs before anyone may participate at the start of a season. Blank forms should be carried to all events in case a new participant wants to play. Any form signed by a new participant on site must be brought to SLP the next business day to be added to the overall file.

A club may either fill in the blanks on the Wentworth agreement form by hand or may request an electronic version of the form to fill them in for participants.

The form asks for full address and phone number of an emergency contact, so this is a convenient way for the club to gather that information for their own uses.

If there is any question at any time about anything on the agreement form or about the appropriateness of using a national form related to your club, contact your SLP advisor.

Forms are valid for one academic year.

By signing below, you are stating that all members of the \_\_\_\_\_ (name of club sport) have turned in agreement forms for a total of \_\_\_\_ (number of waivers forms being handed in) and those forms are being handed into SLP for our file.

Coach/Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

President/Captain Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**OFFICE USE ONLY**

Receipt of Waiver forms:

SLP Club Sport Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

**Number of Forms Approved:** \_\_\_\_\_

**Wentworth Institute of Technology**  
550 Huntington Avenue  
Boston, MA 02115

Event:  
Location:  
Date(s) of Event:

**Waiver of Liability and Release Agreement**

Waiver and Release executed by:

Name: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
\_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

In consideration of being permitted to participate in the \_\_\_\_\_, I understand, in full recognition and appreciation of the dangers and hazards inherent in the event to which I may be exposed during my enrollment/or participation in the event do hereby agree and assume all the risks and responsibilities surrounding my participation in the event or any independent research activities undertaken concerning or related to the event: and, further, I do for myself, my heirs, and personal representative(s) hereby hold harmless, indemnify, release, and forever discharge Wentworth Institute of Technology and all its officers, agents, employees and contractors (collectively "Wentworth") from and against any and all liability, losses, claims, demands, costs and expenses of any nature, actions for any and all damages to personal property or personal injury in both law and in equity that may arise as the result of my participation in the event.

I acknowledge and accept that some of the dangers and hazards inherent in my participation in the event and any independent research activities undertaken concerning or related to the event by me include, but are not limited to, the following: delay, accident or breakdown of transportation; malfunction of equipment; inclement weather conditions; loss or damage to personal property and serious injuries to self, including death.

I hereby understand and agree to the following terms and conditions:

1. Minor participants (under the age of 18) are required to have signed permission from the minor's parent(s) or guardian(s).
2. Alcohol is not permitted in the vehicle of transportation and none will be brought by a participant to the event.

3. It is the participant's responsibility to adhere to the departure schedule and return schedule and any subsequent change to the schedule made by Wentworth Institute of Technology.
4. Wentworth and/or its designee has the right to inspect any or all packages brought by a participant to the event.
5. A participant shall conduct him/herself in accordance with the Student Code of Conduct and all policies and regulations as stated in the Wentworth Institute of Technology Student Handbook.
6. A participant who violates these terms and conditions will be terminated from participation in the event and forfeit all monies paid.
7. Wentworth Institute of Technology reserves the right to terminate participation of any person in the event in its sole discretion.

By signing this Agreement I acknowledge reading it and understand that I am forever discharging and releasing Wentworth from any and all claims, demands, and suits I might have for any and all losses, costs, damages and injuries to myself and my property as the result of my participation in the event. I agree that this Agreement shall be construed in accordance with the laws of the Commonwealth of Massachusetts, without giving effect to the conflict of laws provisions, and that the Commonwealth of Massachusetts shall be the forum for any lawsuits filed under this Agreement or arising as a result of my participation in the event or independent research concerning or related thereto. In witness whereof, I have caused this release to be executed this \_\_\_th day of \_\_\_\_\_, 200\_\_.

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Signature of Participant

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Signature of Parent or Guardian  
if minor under Eighteen Years of Age

## **Doctor Clearance Information Sheet**

**A Doctor Clearance form is simply a letter, note or other form of official communication from the student's physician or other certified medical practitioner that says they are healthy enough to play college sports.**

**Number of Team Members (see roster)** \_\_\_\_\_

**Number of Doctor Clearances** \_\_\_\_\_

**Club Sport First Aid Kit Requirements Sheet  
Wentworth Institute of Technology**

Your team must have a first aid kit present during any activity including but not limited to practices, scrimmages, games, competitions, etc. The first aid kit must be kept in good condition and re-supplied as needed. It must be brought to the play area and not left in a car in a remote area. The first aid kit must include, at a minimum, the following:

A first aid guide, 5 safety pins, at least 3 pairs of gloves (nitrile or latex), metal tweezers, 2-cold compresses, ibuprofen pain reliever, triple antibiotic ointment, anti-microbial wipes, antiseptic wipes, alcohol wipes, insect sting swabs, at least 20 assorted adhesive bandages, at least 10 gauze pads, at least one elastic "ace" bandage, at least 2 rolls of gauze, one roll of medical tape, trauma pads.

You are welcome to create a larger first aid kit than this; this is the required minimum. You may purchase a comparable kit from a store such as REI or Sports Authority or from an internet vendor, but it must meet this minimum. If you are unsure, seek advice from either your coach or from SLP before purchase. The club must fund the purchase of the kit and supplies to re-supply it over the season.

The kit must be purchased and brought to SLP along with this form to be approved for use.

**A copy of the Club Sports Emergency Contact Information Sheet should be kept in the First Aid Kit and be present at all activities of the club.**

By signing below, you are agreeing to be responsible for the kit's presence at all activities of the club.

Coach/Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

President/Captain Signature: \_\_\_\_\_ Date: \_\_\_\_\_



OFFICE USE ONLY

First Aid Kit approval:

SLP Club Sport Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

