

Emmanuel College Intramurals



Participant Waiver Form for Under 18 Years of Age

1. Emmanuel College and the Intramural program are not responsible for any injury that occurs during practice for or during actual game playing time. All Intramural participants are wholly liable for the payment of their medical care that is a result of any injury incurred. Participants are encouraged to have private-personal medical insurance.
2. Participation in Intramural activities is voluntary and all medical expenses incurred through participation are the sole responsibility of the participant.

I give (students name) _____ permission to participate in all Intramural activities.

I have read and understand the above statements.

Parent/Guardian signature: _____

Date: _____

Student signature: _____

Date: _____

Intramural Coordinator signature: _____

Date: _____

Please submit form either by emailing to thamil@ec.edu or fax to 706-245-2867. Once received, the Intramural Coordinator will sign and date.