

**Hoofer Outing Club- GUEST Form**

**First** **Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Middle** **Initial**: \_\_\_\_\_\_\_\_ **Last** **Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone** **Number**: (\_\_\_\_\_\_\_\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency** **Contact** **Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **and phone**: (\_\_\_\_\_\_\_\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

While every subtlety of acceptable behavior cannot be practically detailed, all Hoofer club and team members are expected to stringently adhere to the following standards:

1. The Wisconsin Hoofers is committed to providing a safe, friendly, and inclusive environment for all members. Members are expected to act in a considerate, respectful, and responsible manner at all times while participating in Hoofer activities. Any verbal or physical conduct that demeans or threatens others is absolutely unacceptable.
2. The Wisconsin Hoofers adhere to all policies and procedures of the Wisconsin Union and the University of Wisconsin – Madison in handling complaints of harassment and/or discrimination. Any inappropriate or unwanted comments, misconduct, touching, or bullying should be reported immediately to club advisor.
3. The Wisconsin Hoofers maintain that consumption of alcohol by anyone under the age of 21 during a Hoofer-sponsored activity is illegal and is thus strictly prohibited. Responsible consumption of alcoholic beverages by members who are 21 and over is expected. Alcohol is not allowed in University vehicles at any time.
4. The Wisconsin Hoofers forbid participation in any illegal activity (under Wisconsin or federal law) on any Hoofer-sponsored activity—regardless of location.
5. The Wisconsin Hoofers strictly prohibit consumption of alcohol and illegal drugs prior to or during participation in any inherently dangerous Hoofer activity, including but not exclusive to: sailing, riding, climbing, paddling, skiing/snowboarding, and SCUBA diving.
6. The Wisconsin Hoofers hold members personally and financially responsible for charges incurred as a result of improper behavior, including but not exclusive to: being arrested, being ticketed, damaging or losing property, having to find alternative transportation/lodging due to misconduct, etc.
7. The Wisconsin Hoofers require that all Hoofer trip leaders follow all advisor expectations related to team and club sponsored trips—including trip plans, itineraries, reservations, and event posts in the Hoofer database. Varying expectations do exist depending on the length of the trip, activity risk, distance traveled, and fleet vehicle use and club advisor must be consulted and informed.
8. The Wisconsin Hoofers require that all Hoofers activities follow prudent and reasonable safety/risk management practices which are in line with industry and University specific guidelines, including but not exclusive to manufacturer recommendations and national governing bodies.
9. The Wisconsin Hoofers ask that all members grant permission to use their photograph in print or online promotional materials related to the Wisconsin Hoofers and the Wisconsin Union.

Any individual violating the above standards will be required to meet with club/team leadership and advisor/coach to determine disciplinary outcomes from the incident/activity in question. Outcomes may include suspension or expulsion from Hoofer and Wisconsin Union membership without refund. Hoofer Club Trip Leaders and Instructors retain the authority to immediately dismiss any participant in violation of this agreement or any University policies from a trip, program, or lesson at the participant’s expense. **I understand and agree to the above standards.**

**Full Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Signature***:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Assumption of Risk, Indemnification, Release and Consent for Emergency Treatment

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, desire to participate voluntarily in recreational activities of the Hoofer Outing Club at the University of Wisconsin-Madison.

I UNDERSTAND THAT I AM BEING ASKED TO READ EACH OF THE FOLLOWING PARAGRAPHS CAREFULLY. I UNDERSTAND THAT IF I WISH TO DISCUSS ANY OF THE TERMS CONTAINED IN THIS AGREEMENT, I MAY CONTACT THE **RISK MANAGEMENT,** AT TELEPHONE NUMBER (608) 262-8926 OR (608) 262-8925.

**Assumption of Risks:**

I understand that physical activity related to the **HOOFER OUTING CLUB** by its very nature carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. Some of these involve strenuous exertions of strength using various muscle groups, some involve quick movement involving speed and change of direction, and others involve sustained physical activity, which places stress on the cardio vascular system. The specific risks vary from one activity to another, but in each activity the risks range from: 1) minor injuries such as scratches, bruises and sprains, to 2) major injuries such as fractures, internal injuries, joint or back injuries, heart attacks, and concussions, to 3) catastrophic injuries including paralysis and death. I understand that the University has advised me to seek the advice of my physician before participating in this activity. I understand that I have been advised to have health and accident insurance in effect and that no such coverage is provided for me by the University or the State of Wisconsin. **I KNOW, UNDERSTAND AND APPRECIATE THE RISKS THAT ARE INHERENT IN THE ABOVE-LISTED PROGRAMS AND ACTIVITIES. I HEREBY ASSERT THAT MY PARTICIPATION IS VOLUNTARY AND THAT I KNOWINGLY ASSUME ALL SUCH RISKS.**

***Signature****:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Hold Harmless, Indemnity and Release:**

In consideration of permission for me to voluntarily participate in **Hoofer Outing Club Recreational Activities**, today and on all future dates, I, for myself, my heirs, personal representatives or assigns, agree to defend, hold harmless, indemnify and release, the Board of Regents of the University of Wisconsin System, the University of Wisconsin-Madison, Hoofer Outing Club, and their officers, employees, agents, and volunteers, from and against any and all claims, demands, actions, our causes of action of any sort on account of damage to personal property, or personal injury, or death which may result from my participation in the above-listed program. This release includes claims based on the negligence of the Board of Regents of the University of Wisconsin System, the University of Wisconsin-Madison, Hoofer Outing Club, and their officers, employees, agents, and volunteers, but expressly does not include claims based on their intentional misconduct or gross negligence. **I UNDERSTAND THAT BY AGREEING TO THIS CLAUSE I AM RELEASEING CLAIMS AND GIVING UP SUBSTANTIAL RIGHTS, INCLUDING MY RIGHT TO SUE.**

***Signature****:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Consent for Emergency Treatment:**

I authorize the University of Wisconsin-Madison and its designated representatives to consent, on my behalf, to any emergency medical/hospital care or treatment to be rendered upon the advice of any licensed physician. **I AGREE TO BE RESPONSIBLE FOR ALL NECESSARY CHARGES INCURRED BY ANY HOSPITILIZATION OR TREATMENT RENDERED PURSUANT TO THIS AUTHORIZATION.**

***Signature****:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**This form is valid for guests of the Hoofer Outing Club only.**

**Please submit to event leader or OUW staff for filing before using Hoofer equipment as a guest**