

# DEPARTMENT OF ATHLETICS

University of Ontario Institute of Technology

## VARSITY TRANSPORTATION WAIVER

Date: \_\_\_\_\_, 20\_\_\_\_\_

I, \_\_\_\_\_ will be

(Name)

(Check Box)

A.

Arranging my own transportation **to and from** the following varsity game/event.

B.

Arranging my own transportation **to** the following varsity game/event but will be travelling with the team on the way home.

C.

Travelling with the team but will be arranging my own transportation home **from** the game/event.

SPORT

DATE(S) of GAME/EVENT

DESTINATION

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I understand that I absolve UOIT of any and all responsibilities. I hereby release, waive and discharge the Board of Governors of UOIT officers, employees and voluntary officials of and from all claims, demands, damages, actions and causes of action, in respect to death, injury, loss of damage, to my person or property.

\_\_\_\_\_  
Head Coach Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Athlete Signature

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

\_\_\_\_\_  
Director of Athletics/ Authorization or representative

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

This form must be submitted with athlete and coach signatures no later than **24 hours** before departure