



Insurance Information

Although Miami University Hamilton carries insurance for catastrophic injury (greater than \$30,000), treatment costs for accidents or injuries sustained while playing sports are the responsibility of the participant.

Please understand that it is incumbent upon you, the student-athlete along with parent/legal guardian to arrange for sufficient insurance coverage or to assume the financial risks involved with not having such coverage.

I have read the information contained herein and fully acknowledge my responsibilities relative to insurance coverage for the student-athlete listed below.

Student Athlete's Signature: _____

Policy Holder's Signature: _____

Parent/Legal Guardian Signature: _____
(if athlete is under 18)

Current Health Insurance Policy: _____

Policy Number and Expiration Date: _____

Physician's Name: _____ Phone: _____

In case of emergency, please contact:

Name: _____

Home Address: _____

Work Address: _____

Home Phone: _____ (include area code) Work Phone: _____ (include area code)

I specifically acknowledge that baseball, basketball, cheerleading, golf, softball, tennis and volleyball are violent contact sports involving an even greater risk of injury than other sports.

Signature of Athlete: _____ Date: _____