

Agreement for Assumption of Risk,

Consent for Emergency Treatment, and Member/Recurring Agreement

I desire to participate voluntarily in University Recreation & Wellbeing Facilities and Programs for the duration of the membership 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 Office of Risk Management at riskmgmt@busvc.wisc.edu, or telephone number 608.262.8926.

Assumption of Risks:

I understand that physical activity and participation related to University Recreation & Wellbeing Facilities and Programs, by its very nature, carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries and illnesses. 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 cardiovascular system, and exposure to infectious disease. The specific risks vary from one activity to another, but in each activity the risks range from: 1) minor injuries and illness such as sprains, strains, and bruises, to 2) major injuries and illnesses such as contusions, fractures, internal injuries, respiratory and circulatory/cardiovascular events and complications, concussions, joint or back injuries, other musculoskeletal damages and injuries, and severe illness, to 3) catastrophic injuries and illnesses 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.

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 HOSPITALIZATION OR TREATMENT RENDERED PURSUANT TO THIS AUTHORIZATION.

Membership, Passes, Locker Rental, Towel Service Agreement

- Item(s) will automatically renew each month until the member cancels.
- 1 automatic billing charge is required before cancellation.
- After the 1st automatic billing charge, cancellations received by the last day of the current month will not be charged for the following month.
- Membership does not include a Group Fitness Pass, locker, or towel. Programs/services are sold separately.
- Member agrees to abide by all applicable UW–Madison and Rec Well policies, procedures, and code of conduct. [Policy Number UW-2022](#)
- Rec Well does not offer refunds or extensions for periods in which any Rec Well facilities are closed due to campus closures, campus emergencies, holidays, periods between semesters, weather-related, and closures for maintenance. Our hours of operation can be found [here](#).
- Memberships, passes, locker rentals, and towel service are **non-refundable/non-transferable**.
- Rec Well reserves the right to suspend or terminate any membership/pass at any time due to changes in operations or any violation of University Policy, Rec Well Policy or Federal, State and Local laws and regulations.