CLUB SPORTS SAFETY OFFICER ACCEPTANCE OF RESPONSIBILITY Department of Campus Recreation



This form is to be completed by each club's student safety officer and coach/instructor. Coach/ instructors may not count towards the club requirement of at least two (2) student safety officers (Risk Level II, III, IV clubs).

CLUB SPORT ORGANIZATION:	ACADEMIC YEAR:
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SAFETY OFFICER INFO	DRMATION:	
NAME:		
PHONE:		PSU EMAIL:
YOUR STATUS:	Coach/Instructor	Club Member (Students only)

I hereby accept the responsibility of serving as a Safety Officer for the above listed club sport organization.

I understand that in order to serve in this capacity, I must maintain certifications in Adult CPR/AED, and Standard First Aid from a Club Sports Program-approved provider (American Red Cross, American Heart Association, or Emergency Care & Safety Institute) and the certification must be obtained from an in-person or blended learning course (online only certifications are not accepted). I understand that it is my responsibility to monitor the safety of the environment in which my organization is participating, and report any unsafe conditions, accidents, and/or incidents to the Club Sport Program Office.

I understand that my organization will not be allowed to participate in any Clubrelated activity without a safety officer present. I agree to show valid personal identification when asked by any Club Sport Program or facility staff member.

I agree to complete the Penn State University Incident Report Form for all injuries and incidents sustained to/involving members of my organization or guests at our practice/event to the best of my knowledge and return it to the Club Sports Program Office no later than one business day following the injury/incident.

SIGNATURE

Please provide copies of certifications with this form.

Name of Safety Officer: _____

Club: _____

CPR with AED Certification

AED Certification (if separate from above)

First Aid Certification (if separate from above)