



**Graduate School of Banking at LSU Session
MAY 19 – 31, 2019**

Dear Banking Student,

If you would like to use the LSU University Recreation facilities during your conference this summer, you will need to complete and return this form. We will put your information into our system prior to your arrival to make the process more efficient.

Once you have arrived at LSU, you will need to come to the University Recreation Operations Desk to make payment and receive your validated pass which will allow you to enter the building each time. You will need to have your photo ID and Graduate School of Banking nametag with you at all times. Thank you for your interest in University Recreation.

Name: _____

Date of Birth: _____ Gender: _____ Male _____ Female

Address: _____

City, State, Zip: _____

Phone: (_____) _____

Email: _____

Pass Options: _____ One-Week Pass: \$35 + tax
_____ Two-Week Pass: \$50 + tax

Replacement Card Fee: \$15

Locker Plan: \$20 + tax (for two week conference duration and based upon availability)

Payment Options: Cash, Check, VISA, and MasterCard

PRIOR TO COMING IN, PLEASE MAIL, FAX, OR EMAIL THESE FORMS TO:

Allison McCann
Facility Operations Coordinator
University Recreation
Student Recreation Complex
Baton Rouge, LA 70803
Office: 225/578-2422
Fax: 225/578-8489
Email: amccan6@lsu.edu

Registration Hours:
Monday-Thursday 8:00am-8:00pm
Friday 8:00am-7:00pm
Saturday/Sunday Noon-7:00pm

Building Hours:
Monday-Thursday 5:45am-9:00pm
Friday 5:45am-8:00pm
Saturday 9:00am-8:00pm
Sunday 10:00am-8:00pm



PARTICIPATION AGREEMENT
LSU University Recreation

I understand and agree that there is a risk of serious injury to me while utilizing University Recreation facilities, equipment, and programs and recognize every activity has a certain degree of risk, some more than others. By participating, I knowingly and voluntarily assume any and all risk of injuries, regardless of severity, which from time to time may occur as a result of my participation in athletic and other activities through LSU University Recreation.

I hereby certify I have adequate health insurance to cover any injury or damages that I may suffer while participating, or alternatively, agree to bear all costs associated with any such injury or damages to myself.

I further certify that I am in good health and have no mental or physical condition or symptoms that could interfere with my safety or the safety of others while participating in any activity using any equipment or facilities of LSU University Recreation. I understand and agree that I alone am responsible to determine whether I am physically and mentally fit to participate, perform, or utilize the activities, programs, equipment or facilities available at Louisiana State University, and that I am not relying on any advice from LSU University Recreation in this regard. To the extent I have any questions or need any information about my physical or mental condition or limitations, I agree to seek professional advice from a qualified physician.

Further, I hereby RELEASE AND HOLD HARMLESS, the State of Louisiana, the Board of Supervisors of Louisiana State University and Agricultural & Mechanical College, and its respective members, officers, employees, student workers, student interns, volunteers, agents, representatives, institutions, and/or departments from any and all liability, claims, damages, costs, expenses, personal injuries, illnesses, death or loss of personal property resulting, in whole or in part, from my participation in, or use of, any facility, equipment, and/or programs of Louisiana State University.

Print Name of Participant

Signature of Participant

Date

Print Name of Parent/Legal Guardian (if under 18)

Signature of Parent/Legal Guardian (if under 18)

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