

# CLARK ATLANTA UNIVERSITY ATHLETIC DEPARTMENT WAIVER & RELEASE FORM FOR SICKLE CELL TRAIT TESTING

## POTENTIAL/CURRENT STUDENT-ATHLETE:

Please note that you must either a) complete this waiver form indicating that you decline to be tested for the sickle cell trait or b) agree to be tested and provide those or preexisting results to Clark Atlanta University. The Department of Athletics and Sports Medicine Department require your test results to be on file or this signed waiver declining testing **PRIOR** to your participation in **ANY** NCAA, SIAC, and/or CAU related athletic activities.

## BACKGROUND:

The NCAA Division II Legislative Council has decided that all NCAA student athletes, beginning in the 2012-2013 year, **“will require new and existing student-athletes (and those trying out) to take a sickle cell solubility test unless they can provide documented results of a previous test or decline the test through a written release”**, bringing their legislation in line with Division I sports. The NCAA recommends that student-athletes undergo testing for sickle cell trait. The following is a brief summary of information about sickle cell trait provided by the NCAA:

*“Sickle cell trait is not a disease. Sickle cell trait is the inheritance of one gene for sickle hemoglobin and one for normal hemoglobin. Sickle cell trait will not turn into the disease. Sickle cell trait is a life-long condition that will not change over time. During intense exercise, red blood cells containing sickle cell hemoglobin can change shape from round to quarter-moon, or “sickle.” Sickle red cells may accumulate in the bloodstream during intense exercise, blocking normal blood flow to the tissue and muscles. During intense exercise, athletes with sickle cell trait have experienced significant physical distress, collapsed and even died. Heat, dehydration, altitude and asthma can increase the risk for and worsen complications associated with sickle cell trait, even when exercise is not intense. Athletes with sickle cell trait should not be excluded from participation as precautions can be put into place.”*

NCAA: A Fact Sheet for Student Athletes, Sickle Cell Trait,  
[https://ncaaorg.s3.amazonaws.com/ssi/other/SSI\\_NCAASickleCellTraitforSA.pdf](https://ncaaorg.s3.amazonaws.com/ssi/other/SSI_NCAASickleCellTraitforSA.pdf)

More information and resources regarding sickle cell trait and the NCAA’s recommendation for sickle cell trait testing can be found at the NCAA web site resource pages regarding the sickle cell trait, accessible at: [www.NCAA.org/health-safety](http://www.NCAA.org/health-safety).

## SICKLE CELL TRAIT TESTING:

If you are interested in getting tested for sickle cell trait or if you have any questions about sickle cell trait generally, you may contact the Clark Atlanta University Sports Medicine Department at (470) 576-3901; email: [vhale1@cau.edu](mailto:vhale1@cau.edu). Alternatively, if you have already been tested, please send documented results of your sickle cell trait testing to Compliance and/or the Sports Medicine Department of Clark Atlanta University.

SICKLE CELL TRAIT TESTING WAIVER:

By signing this waiver, I am certifying that I understand that the NCAA recommends that all student athletes undergo testing for sickle cell trait. Furthermore, I have had the opportunity to read and review the above summary regarding sickle cell trait and I have had the opportunity to review the Sickle Cell Trait Fact Sheet for Student-Athletes and other information available through the NCAA web site and by Clark Atlanta University. By providing my signature below, I confirm that I have considered the information, understand it and that I do not wish to undergo testing for sickle cell trait.

In consideration of this waiver, I hereby RELEASE, WAIVE, HOLD HARMLESS, DISCHARGE RESPONSIBILITY FROM AND WILL NOT TO SUE Clark Atlanta University, its trustees, regents, officers, agents, representatives or employees for; any and all liability, claims, actions, demands, expenses, attorneys fees, breach of contract actions, breach of statutory duty or other duty of care, warranty, strict liability actions and causes of action whatsoever, that may arise from my (or my minor child's) decision to forego sickle cell trait testing.

I hereby further understand that this Waiver and Release has been construed in accordance with the laws of the State of Georgia. I understand that I sign this Waiver and Release voluntarily, and that no oral representations, statements, or inducements, apart from the foregoing information have been made to me in regard to this subject matter, that I am fully competent, and that I execute this Waiver for full, adequate and complete consideration fully intending for me (and my minor child) to be bound by the same.

I further certify that I am at least eighteen (18) years of age and fully competent; or that if under eighteen (18) years of age, my parent or legal guardian is also signing individually and on my behalf both agree to be bound by the terms of this Sickle Cell Trait Testing Waiver and Release Form.

Print Name: \_\_\_\_\_  
(Student-Athlete)

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

Print Name: \_\_\_\_\_  
(Parent Guardian, if under 18)

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