UGA Hazing Compliance Form

Hazing is defined as any intentional, negligent or reckless action, or situation which causes another pain, embarrassment, ridicule or harassment, regardless of the willingness of the participant.

Such actions and situations include, but are not limited to the following:

1. forcing or requiring the drinking of alcohol or any other substance;
2. forcing or requiring the eating of food or anything an individual refuses to eat;
3. calisthenics (push-ups, sit-ups, jogging, runs etc.);
4. “treeings” (tying someone up and throwing food or other substances on them);
5. paddle swats
6. line-ups (yelling at people in any formation or harassing them);
7. forcing or requiring the theft of any property;
8. road trips (dropping someone off to find his own way back);
9. scavenger hunts;
10. permitting less then six (6) continuous, uninterrupted hours of sleep per night;
11. conducting activities which do not allow adequate time for study (not allowing to go to class, missing group projects, etc.);
12. nudity at any time;
13. running personal errands of the members (driving to class, cleaning their individual rooms, serving meals, picking up laundry, washing cars, etc.);
14. requiring the violation of University, Federal, State or local law.

HAZING IS AGAINST STATE, FEDERAL, AND LOCAL LAW.

I understand all components of the UGA Hazing Policy, I understand the reasons why this policy was adopted by the University of Georgia.

I agree to support the policy and its implementations. Participation in hazing activities or the failure to report such activities (had prior knowledge of hazing violations and did not take the necessary steps to stop hazing from occurring) may cause action to be brought against myself and the chapter.

Any hazing activities will result in an automatic referral to the Office of Judicial Programs.

I have read, understand, and agree to adhere to the UGA Hazing Policy.

_________________________________               _______________________________
(Print full name)                                               (Signature)

_________________________________               _______________________________
(Date of Birth)                                                           (Student Organization)

_________________________________
(Date)