US Lacrosse Participant Waiver & Release of Liability

INSTRUCTIONS: 1) Each player should read the statement below before completing and signing this Waiver & Release roster.
2) Parents/Guardians should read the statement below before signing on the same numbered line as their player.

AGREEMENT: In consideration of my participation in the sponsored activities of the _____ camp/clinic/tournament, I acknowledge, agree to and understand that:

1. WAIVER & RELEASE OF LIABILITY: I am fully aware of and appreciate the risks, including the risk of catastrophic injury, paralysis and even death, as well as other damages and losses, associated with participation in a lacrosse event. I further agree on behalf of myself, my heirs, and personal representatives, that US Lacrosse, the host organization, and sponsors of any US Lacrosse sanctioned event, along with the coaches, volunteers, employees, agents, officers and directors of these organizations, shall not be liable for any injury, loss of life or other loss or damage occurring as a result of my participation in the event.
2. MEDICAL ATTENTION: I hereby give my consent to US Lacrosse and the host organization of any US Lacrosse sanctioned event to provide, through a medical staff of its choice, customary medical/athletic training attention, transportation and emergency medical services as warranted in the course of my participation in US Lacrosse sanctioned events.
3. READINESS TO COMPETE: I will only participate in those US Lacrosse competitions for which I believe I am physically and psychologically prepared to compete.
4. CODE OF CONDUCT: I have read and agree to all terms in the US Lacrosse Code of Conduct, especially with regard to my responsibilities as a player.

PRINT or TYPE PLAYER'S NAME	PLAYER'S SIGNATURE	DATE	RESIDENCE/STREET ADDRESS	State	Zip. Code	PARENT OR GUARDIAN SIGNATURE	DATE	RELATIONSHIP TO PLAYER