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 membership in **US Lacrosse** and of my participation in the sponsored activities of the _____**Lacrosse Association,** I acknowledge, agree to and understand that:

1) **READINESS TO COMPETE:** Voluntarily and of my own free will, I elect to participate as a member of the _____ Lacrosse Association. I will only participate in those US Lacrosse competitions and activities sponsored by _____ Lacrosse Association for which I believe I am physically and psychologically prepared to compete.

2) **MEDICAL ATTENTION:** I hereby give my consent to US Lacrosse and to _____Lacrosse Association and the host organization of any US Lacrosse sponsored event to provide, through a medical staff of its choice, customary medical/athletic training attention, transportation and emergency medical services as warranted through the course of my participation in sponsored lacrosse activities.

3) **WAIVER & RELEASE OF LIABILITY:** I am fully aware of and appreciate the risks associated with participation in a lacrosse event, including the risk of catastrophic injury, paralysis and even death, as well as other types of damages and loss. I further agree on behalf of myself, my heirs, and personal representatives, that US Lacrosse, _____ Lacrosse Association, the host organization, and sponsors of any US Lacrosse event, along with their 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(s). My signature below is my acknowledgement that I have read and understood every provision of this Waiver and Release of Liability, and that I agree to abide by it.

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