

Tri Cities Youth Lacrosse

Amateur Athletic Waiver and Release of Liability

INSTRUCTIONS:

- Each player must read the statement below before completing and signing this Waiver & Release.
- Parents/Guardians must read the statement below before signing this Waiver & Release.

AGREEMENT:

In consideration of my participation in the sponsored activities of the Tri Cities Youth Lacrosse (TCYL), 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 TCYL, 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, or as a result of equipment that may have been provided to me for these activities.
2. **MEDICAL ATTENTION:** I hereby give my consent to TCYL and any US Lacrosse related event to provide, through a medical staff of its choice, customary medical/athletic training attention, transportation and/ or emergency medical services as warranted in the course of my participation in TCYL Lacrosse events.
3. **READINESS TO COMPETE:** I will only participate in those TCYL competitions for which I believe I am physically and psychologically prepared to compete.

Print Player's

Name Player's

Signature Date

Parent Signature

Date

Relationship to Player