



**RELEASE AND INDEMNIFICATION AGREEMENT
TEXAS BAY AREA LACROSSE, INC.**

PARTICIPANT: _____
Name (last name first - please print or type) US Lacrosse #/Exp Date

Address

City, State, Zip Code

DESCRIPTION OF ACTIVITY: 2017 Fall 7v7 Tournament
LOCATION OF ACTIVITY: Sylvan Rodriguez Park
1201 Clear Lake City Blvd
Houston, TX 77062

DATES OF ACTIVITY: December 9th/10th, 2017

I, the above-named Participant or the Parent/Guardian of the above-named Participant, who is under eighteen years of age, am fully competent to sign this Agreement. I acknowledge that the nature of the Activity or Trip may expose Participant to hazards or risks that may result in Participant's illness, personal injury or death and I understand and appreciate the nature of such hazards and risks. In consideration of Participant being permitted to participate in the Activity or Trip, I hereby accept all risk to Participant's health and of his/her injury or death that may result from such participation and I hereby release the Texas Bay Area Lacrosse, Inc. and or the Sylvan Rodriguez Park/City of Houston, including the their governing board, officers, employees and representatives from any and all liability to Participant, Participant's personal representatives, estate, heirs, next of kin, and assigns for any and all claims and causes of action for loss of or damage to Participant's property and for any and all illness or injury to Participant's person, including his/her death, that may result from or occur during Participant's participation in the Activity or Trip, whether caused by negligence of the Texas Bay Area Lacrosse, Inc. and or Sylvan Rodriguez Park/City of Houston, their governing board, officers, employees, or representatives, or otherwise. I further agree to indemnify and hold harmless the Texas Bay Area Lacrosse, Inc. and or Sylvan Rodriguez Park/City of Houston and their governing board, officers, employees, and representatives from liability for the injury or death of any person(s) and damage to property that may result from Participant's negligent or intentional act or omission while participating in the described Activity or Trip.

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR PARTICIPANT'S INJURY OR DEATH OR DAMAGE TO PARTICIPANT'S PROPERTY THAT OCCURS WHILE PARTICIPATING IN THE DESCRIBED ACTIVITY OR TRIP AND IT OBLIGATES ME TO INDEMNIFY THE PARTIES NAMED FOR ANY LIABILITY FOR INJURY OR DEATH OF ANY PERSON AND DAMAGE TO PROPERTY CAUSED BY PARTICIPANT'S NEGLIGENT OR INTENTIONAL ACT OR OMISSION.

Signature of Participant (Only required if Participant is 18 or older) Date signed: _____, 20__

Participant Birth date (Only required if Participant is 18 or older): _____

Parent or Legal Guardian must execute below if Participant is under the age of 18

Signature of Parent/Guardian Date signed: _____, 20__

Printed Name of Parent/Guardian