

LINE 39 LACROSSE, LLC

WAIVER AND RELEASE OF LIABILITY

Participant Name: _____ US Lacrosse # _____

Event or Activity: _____

In consideration of the risk of injury while participating in the above event or activity, I knowingly waive any and all rights, claims or causes of action of any kind whatsoever arising out of my participation. I release Line 39 Lacrosse, LLC, and their staff, for any physical or psychological injury, that I may suffer as a direct result of my participation in the aforementioned activity, including traveling to and from an event related to this activity. I am aware that I am voluntarily participating in the above event or activity and understand I am participating entirely at my own risk.

In the event that I should require medical care or treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

In the event that any damage to equipment or facilities occurs as a result of my or my family's willful actions, neglect or recklessness, I acknowledge and agree to be held liable for any and all costs associated with any actions or neglect or recklessness.

If the participant is a minor, I agree that the participant has my consent to partake in the above event or activity. In the event of an emergency, I consent for Line 39 Lacrosse, LLC to seek emergency treatment and assume all financial responsibilities for the costs related to this emergency treatment.

Sign Here if Participant is an Adult:

Signature of Participant: _____ Date: _____

Sign Here if Participant is a Minor:

Name of Parent or Guardian: _____

Signature of Parent or Guardian: _____ Date: _____