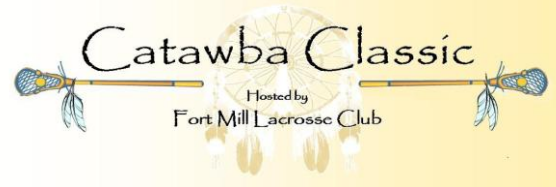


WAIVER INSTRUCTIONS:

1. Print the following page
2. Each player must read the statements in the attached waiver before completing and signing.
3. Parents/Guardians must read the statements in the attached waiver before completing and signing.
4. Your coach will turn in a completely signed waiver for each team player at the Registration Table at the Catawba Classic Tournament prior to the beginning of the tournament.



Participant Waiver & Release of Liability

AGREEMENT: In consideration of my participation in the sponsored activities of the Catawba Classic tournament, I acknowledge, agree to and understand the following:

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 realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault. I acknowledge that this Participant Waiver and Release of Liability form will be used by Fort Mill Lacrosse, Ltd., sponsors, and organizers in events in which I may participate and that it will govern my actions and responsibilities at said events.

I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (a) waive, release and discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me, Fort Mill Lacrosse Ltd., the organizer and the following entities or persons: their directors, officers, employees, volunteers, representatives, and agents, the event holders, event sponsors, event directors, event volunteers, and event officials.; and (b) indemnify and hold harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of my or any actions during this event.

2. **MEDICAL ATTENTION:** I hereby give my consent to the Fort Mill Lacrosse, Ltd., its agents and assigns, 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 the Catawba Classic.

3. **READINESS TO COMPETE:** I will participate in the Catawba Classic only to the extent 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, whose terms and provisions are incorporated herein by this reference, especially with regard to my responsibilities as a player.

5. I understand that at this event or related activities I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by Fort Mill Lacrosse, Ltd., the event holders, producers, sponsors, organizers, agents and/or assigns.

This Participant Waiver and Release of Liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. I hereby certify that I have read this document and I understand its contents.

PRINT PLAYER'S NAME: _____

ACTIVE US LACROSSE MEMBERSHIP #: _____
OR CURRENTLY IN FORCE MEDICAL INSURANCE PROVIDER _____

PLAYER'S SIGNATURE: _____ DATE _____

PARENT'S SIGNATURE: _____ DATE _____

PARENT'S NAME (print): _____