

NORTHERN EDGE LACROSSE CLUB

WAIVER AND RELEASE STATEMENT

THE UNDERSIGNED, BEING A PARENT OR LEGAL GUARDIAN OF THE CHILD REQUESTING CLUB TEAM ADMITTANCE, DOES HEREBY AFFIRM THAT THE APPLICANT IS IN GOOD HEALTH, AND SUFFERS FROM NO SERIOUS ILLNESS, DISABILITY OR CONDITION THAT REQUIRES THE TAKING OF MEDICATION ON A REGULAR BASIS UNLESS THAT CONDITION IS DISCLOSED AND APPROVED. FURTHERMORE, THE UNDERSIGNED HAS NO KNOWLEDGE OF ANY REASON THE APPLICANT PARTICIPATE IN VIGOROUS PHYSICAL ACTIVITY.

I UNDERSTAND THAT, AS A CONDITION OF ADMITTANCE AS A PLAYER/PARTICIPANT, THE UNDERSIGNED, ON BEHALF OF ALL PARENTS AND GUARDIANS, AND ON BEHALF OF THE APPLICANT, HEREBY RELEASES THE NORTHERN EDGE LACROSSE CLUB, UNIVERSITY OF VERMONT, JEN JOHNSON AND ALL OTHER EMPLOYEES OR AGENTS OF THE CAMP FROM ANY LIABILITY FROM ANY LOSS OR DAMAGE OR PERSONAL PROPERTY, INJURY OR ILLNESS, MENTAL OR PHYSICAL SUFFERED BY THE PLAYER/PARTICIPANT DURING OR RELATED TO LACROSSE EVENT/CLINIC/PRACTICE/TOURNAMENT.

PARENT/GUARDIAN SIGNATURE _____
DATE _____
PARENT/GUARDIAN CELL PHONE # _____

PARTICIPANTS
NAME _____
ATHLETE'S CELL PHONE # _____
SCHOOL _____
HIGH SCHOOL GRAD YEAR _____

T-SHIRT SIZE - XS S M L XL
SHORTS SIZE - XS S M L XL
SWEATSHIRT SIZE - XS S M L XL
SWEAT PANT SIZE - XS S M L XL