

7's For 7 LACROSSE TOURNAMENT
January 9, 2016

WAIVER OF LIABILITY

In consideration for receiving permission to participate in the 7's For 7 Lacrosse Tournament, I/we _____ do hereby agree for ourselves, our heirs, executors and administrators, to release, hold harmless and discharge the 7's For 7 Lacrosse Tournament, any and all Sponsors and Organizers, Houston Youth Lacrosse, The Friends of Drew Webb, Bear Branch Park, The Woodlands Township and all party's officers, staff, administrators, volunteers, sponsors, representatives and assigns, for and against any and all claims, actions, cause of actions, suits, judgments, and demands whatsoever arising directly or indirectly in connection with the player's participation in the 7's For 7 Lacrosse Tournament, whether caused by negligence or otherwise. I am fully aware and appreciate the risks, including the risk of a catastrophic injury, paralysis and even death, as well as other damages and losses associated with participation in a lacrosse event. By signing below, I acknowledge that I have read and fully understand this form and further understand the terms herein are contractual and not a mere recital. Further, I fully understand that I, for myself or as parent/guardian, am responsible for any and all medical expenses that may be incurred as a result of any injury resulting from participating in the tournament.

Player's Name _____

Team _____

Signature of Player or Parent/Guardian _____

Date _____

MEDICAL RELEASE AUTHORIZATION

I/we, being the player or his legal guardian(s), authorize the staff of the 7's For 7 Lacrosse Tournament and their agents permission to request treatment as necessary to ensure the well being of myself/our dependent. I certify that the player is in good health and able to participate in the scheduled games.

Player's Name _____

Signature of Player or Parent/Guardian _____

Date _____

Health Insurance Company _____

Health Insurance Policy Number _____