





First Name _____ Last Name _____ TeamName _____
 Birthdate _____ / _____ / _____ Cell Phone _____ Coach _____
Month Day Year HS Grad Yr
 School _____ HS Grad Yr _____
 Home Phone _____ Home Address _____ City _____ St _____ Zip _____
 E mail  Athlete _____  Parent _____
 Mom's Name _____ Cell _____ Dad's Name _____ Cell _____

- Goal
- Defense
- Midfield
- Attack

Division Varsity JV Risers

Waiver & Release of Liability

I recognize and acknowledge that there are certain risks of physical injury to participants in the organized team sport of lacrosse and I knowingly assume full responsibility for my minor child/ward's participation and thus the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward may sustain as a result of said participation. I do hereby forever waive, release, discharge and relinquish all claims against Synapse Sports, Inc. and its member clubs, womenslacrosse.com and its affiliated lacrosse events, Top of the Bay Sports, Inc., its owner(s), officers, agents, employees and volunteers, insurers, successors and assigns from any and all claims, costs, expenses, liabilities, losses, damages for personal injury, disability, death, property loss or otherwise that I or my minor child/ward may have or which may accrue as a result of, arising out of, connected with, or in any way associated with her/his participation in the organized team sport of lacrosse and/or any related activities, programs, events or services.

I certify that my minor child/ward is in good physical condition and can participate in the game of lacrosse. Further, I authorize the club or event administrators to request medical treatment for my minor child/ward as necessary to insure their well-being.

I have read and fully understand the above Athlete Waiver & Release of Liability and agree to its terms in their entirety.

Athlete _____ Date _____ Parent/Guardian _____ Date _____

Health Insurance Provider _____ Policy # _____

Mail completed form to your coach

Please send TOP portion ONLY to your coach by May 1.

