

**LONG ISLAND PRIDE LACROSSE CLUB**  
**MINOR WAIVER AND RELEASE OF LIABILITY**

In consideration for being allowed to participate in any way in the Long Island Pride Lacrosse Club and related events and activities, the undersigned:

1. Both Athlete and Parent/Legal Guardian acknowledge that the athlete is physically and psychologically prepared to compete.
2. Agree that the parent(s) and or legal guardian(s) will instruct the minor participant that prior to participating, he or she should inspect the facilities and equipment to be used, and if the participant believes anything is unsafe, he or she should immediately advise his or her coach or supervisor of such condition(s) and refuse to participate.
3. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inaction or negligence, but the action, inaction or negligence, but the action, inaction or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
4. Assume all foregoing risk and accept personal responsibility for damages following such injury, permanent death or disability.
5. Release, waive, discharge and covenant not to sue Long Island Pride Lacrosse, their respective administrators, directors, agents, coaches and other volunteers of the organization, or other participants, all of which are hereinafter referred to a "releasees," from any and all claims, demands, losses and damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise.
6. Agree to all the terms of the Code of Conduct adopted by the Long Island Pride and US Lacrosse.

I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Parent/Guardian Telephone

\_\_\_\_\_  
Name of Participant/Player

\_\_\_\_\_  
Signature of Participating Player

\_\_\_\_\_  
Address of Participant/Player