**Waiver & Release of Liability / Parent Consent:**

“I understand that lacrosse is a physical contact sport and hereby give my permission for my child to participate in the 419 Lacrosse LLC tryouts and programs. I release, waive, discharge, and covenant not to sue 419 Lacrosse LLC, or any of it’s departments, coaches, directors, or any used facilities for injuries or illness that occurs during play (including practices and other sponsored activities, not necessarily game-related). I verify to the best of my knowledge, the above named applicant is physically able to participate in all lacrosse activities. As a participant in a contact sport, the above player accepts the responsibility to play in a sportsman-like manner, and for the normal inherent risk of athletic injury.”

**Grant of Consent:**

“In the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for the transfer of the injured party to any hospital reasonably accessible. This authorization does not cover major surgery unless the medical opinions of two licensed physicians or dentists, concurring regarding the necessity of such surgery, are obtained prior to the performance of such surgery. For facts concerning the injured party’s medical history, including allergies, medications being taken, and any physical impairment to which a physician should be alerted, I hereby grant consent for the following medical care providers and local hospitals to be called.”

