



## 2. HEALTH INFORMATION, CONSENT & RELEASE FORM - NEW PLAYER

CAMP LOCATION \_\_\_\_\_ Date \_\_\_\_\_ Email \_\_\_\_\_

Player Name \_\_\_\_\_ Address \_\_\_\_\_

Emergency Contact Name & Cell Number \_\_\_\_\_

Alternate Contact Name & Cell Number \_\_\_\_\_

### HEALTH INFORMATION

If the player should be restricted from any activity or has a medical condition or history which would require special attention and/or involvement on the part of camp staff, or if the player is allergic to any medications, please note here:

\_\_\_\_\_  
\_\_\_\_\_

### INSURANCE INFORMATION

Carrier's Name \_\_\_\_\_ Policy Number \_\_\_\_\_

Policy Holder Name \_\_\_\_\_ Policy Holder Date of Birth \_\_\_\_\_

### LIABILITY RELEASE STATEMENT

I represent to All West Lacrosse ("AWL") and its officers, directors, shareholders, employees, staff, agents, sponsors and invitees, and the successors and assigns of each of them (collectively "All West Parties") that (1) I am the parent and/or guardian of the above-name player ("Player") and (b) I am authorized to execute this Consent and Release. I acknowledge and understand that lacrosse and the other camp activities involve physical contact between a participant and other people, the equipment, and the ground, and could result in injury to Player. I am voluntarily permitting Player to participate in the Camp with full knowledge of the risks involved. On behalf of Player, myself, and the members of the family of Player, and the heirs, administrator, executor, successors and assigns of each of them ("Player Parties"), I agree to accept any and all risks of injury or death to Player and assume all risk, waive any and all claims against and release each of the All West Parties from any and all losses, claims, medical bill liens and/or expenses, suits, judgments, liabilities, damages, costs and expenses, including, without limitation, any and all direct, indirect, consequential and/or incidental damages, attorneys' and experts' fees and expenses and court costs (collectively, "Liabilities") and agree that no All West Party shall be liable to any Player Party for loss of or damage to any property whatsoever or death of, illness of or injury to any person whatsoever, including, without limitation, Player, arising directly or indirectly from Player's participation in the Camp, except to the extent caused by the gross negligence or willful misconduct of an All West Party, whether on premises owned or controlled by AWL or elsewhere. I agree to release, indemnify, defend, and hold harmless the All West Parties from and against any and all Liabilities arising from loss of or damage to any property or death or illness of or injury to any person, including, without limitation, Player, as a result of Player's presence at or participation in the Camp, except to the extent caused by the gross negligence or willful misconduct of an All West Party, whether on premises owned or controlled by AWL or elsewhere. On behalf of the Player Parties, I hereby consent and give permission for Player to receive emergency medical or surgical treatment and hospitalization if AWL in good faith believes the same is necessary, and I agree that I will be financially responsible for the cost of same. I understand that every attempt will be made to contact me at the emergency telephone number(s) I have provided below or the alternate person named below before taking this action. I further agree that photographs of players at the Camp taken by or on behalf of AWL are the property of AWL and may be used for any purpose, including, without limitation, publicity and advertising, and I hereby consent to such use. I have read and understand this Consent and Release. I agree that the invalidity of any provision in this Consent and Release as determined by a court of competent jurisdiction shall not affect the validity of any other provision hereof. This Consent and Release governed by the internal laws, and not the law of conflicts, of California to agreements made and to be performed in California. In the event of commencement of either arbitration or suit by either party to enforce the provisions of this Consent and Release, the prevailing party shall be entitled to receive reasonable attorneys' fees and costs in addition to any other relief granted.

Signature \_\_\_\_\_ Print last name \_\_\_\_\_ Date \_\_\_\_\_