## **Washington Lacrosse Invitational Roster & Waiver**

TEAM NAME	
TEAM COACH	
COACH PHONE	
DIVISION	

Medical or accident insurance does not cover participation in Washington Park District activities. Each participant must furnish his/her own personal coverage. Many sport activities and programs have inherent elements of danger. Parent permission is needed to call an ambulance in any emergency. As a parent/guardian of a participant under 18 years of age, I hereby agree to hold harmless and indemnify the Washington Park District, its trustees, employees and Board of Commissioners from any responsibility for any accident, injury or damage that may occur as a result of the participant's acts or omissions. In case of an accident or sickness, I consent to emergency medical care provided by ambulance or hospital personnel.

## **US** Lacrosse

member #	Player Last Name	First Name	Guardian Signature	Emerg. Phone	Hotel Name