



Maryland Rockfish Lacrosse Cup 2011

Waiver of Liability

In consideration of participating in the Maryland Rockfish Lacrosse Cup, the player named below and the parent or guardian do hereby agree for ourselves, our heirs, executors and administrators, to release, hold harmless and forever discharge Old Line State Lacrosse Club, Inc, their officers, staff, administrators, volunteers, sponsors and representatives and assigns, Severna Park Green Hornets, Anne Arundel County Recreation and Parks, and Chesapeake High School, for and against any and all claims, actions, cause of actions, suits, judgments, and demands whatsoever arising directly or indirectly in connection with the players participating in the Maryland Rockfish Lacrosse Cup. By signing below, I acknowledge that I have read and understand this form and further understand the terms herein are contractual and not mere recital.

Player's Name _____

Team _____

Signature of Parent/Guardian _____ **Date** _____

Medical Release Authorization

I/we being the legal guardians of the applicant authorize the staff of the Maryland Rockfish Lacrosse Cup and their agents permission to request treatment as necessary to ensure the well being of our dependent. I certify that he is in good health and able to participate in the scheduled games. I am attaching a note explaining any special physical limitations and/or required medical attention that is necessary for my son.

Signature of Parent/Guardian _____ **Date** _____

Health Insurance Company _____

Health Insurance Policy Number _____