We/I hereby request you accept the athlete application for enrollment in the Blue Label Lacrosse training. It is highly recommended that all players wear protective gear (including face masks – for most drills) to maintain a safe and healthy practice and playing environment. In consideration of your acceptance of this application, we/I hereby agree to release, indemnify and hold harmless the Blue Label Lacrosse club and the Blue Label coaches from all claims resulting from any injury (including sickness) sustained by my child while participating in the training and playing in future tournaments. We/I further hereby give permission to coaches, training staff or other medical professionals to provide care as deemed necessary to my child in case of injury or illness.

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_