



2017 Ice Breaker Lacrosse Tournament

Team Roster & Waiver Form

Team Name: _____ Team Level _____

	<u>Player Name</u>	<u>DOB</u>	<u>US Lax #</u>	<u>Parent Signature</u>
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Waiver, Release of Liability and Assumption of Risk Agreement AGREEMENT

I understand that there are risks of injury when I participate in sports and other activities at this event. I also understand that the Brookfield Lacrosse Club, including its board of directors and members, and the Town of Brookfield, CT, including its employees, is not accepting or assuming any duties or responsibilities with respect to my safety. Therefore, in consideration of the permission extended to me to participate in this event, I release and forever discharge the Brookfield Lacrosse Club and its board of directors and members, the Town of Brookfield, CT, and its employees from any claims that I have, or that I might in the future have, arising out of or concerning my presence at this event or my participation in any activity while at this event, and I promise to indemnify the Brookfield Lacrosse Club, including its board of directors and members, and the Town of Brookfield, CT, and including its employees, and hold it harmless from any claims and related defense costs, including reasonable attorneys fees, arising out of my presence or my participation in any activity at this event.