

Participant Information:

Full Name: _____ USA Lacrosse Number: _____ Exp Date: _____

Emergency Contact Name & Number: _____

Activity Details:

I, the undersigned legal guardian of the participant, understand that the participant will be engaging in lacrosse activities organized by the "Metro Outlaws Lacrosse Club."

Assumption of Risk:

I am aware that participating in lacrosse involves inherent risks, including, but not limited to: physical injury, emotional distress, and property damage. I voluntarily accept and assume such risks on behalf of the participant, known and unknown, arising from participation with Metro Outlaws Lacrosse Club.

Release of Liability:

In consideration of being allowed to participate in the Metro Outlaws Lacrosse Club, I hereby release and discharge Metro Outlaws Lacrosse Club, its organizers, coaches, instructors, and any affiliated entities from any and all liability, claims, demands, actions, or causes of action related to any loss, damage, or injury, including death, that may be sustained by the participant during or as a result of their participation with Metro Outlaws. This release includes, but is not limited to: claims of negligence, breach of contract, and strict liability.

Medical Information:

I certify that the participant is physically fit and has no medical conditions that would prohibit them from participating in lacrosse activities. I understand the importance of maintaining personal health insurance coverage and agree to be responsible for any medical expenses incurred by participation with Metro Outlaws Lacrosse Club.

Emergency Medical Treatment Authorization:

In an emergency, I authorize Metro Outlaws Lacrosse Club's representatives to obtain medical treatment for the participant and agree to be financially responsible for any expenses incurred from such treatment.

Indemnification:

I agree to indemnify and hold harmless Metro Outlaws Lacrosse Club, its organizers, coaches, and affiliated entities from any claims, liabilities, losses, damages, or expenses, including attorney fees, arising out of participation in the Metro Outlaws Lacrosse Club.

Parent/Guardian Consent:

I, the undersigned parent or legal guardian of the participant, hereby consent to their participation in the Metro Outlaws Lacrosse Club and agree to all terms outlined in this waiver on their behalf.

Parent/Guardian's Name: _____

Signature: _____

Date: _____

Witness: _____

Metro Outlaws Lacrosse Club

Behavior Contract

This behavior contract is a commitment between the student athlete, _____ and the Metro Outlaws Lacrosse Club, hereby referred to as the "club." It is essential to maintain a positive and disciplined environment for the benefit of the entire team. By signing this contract, the student athlete agrees to abide by the following terms and conditions:

Attendance and Punctuality:

The student athlete commits to attending all scheduled practices, games, and team events on time. If unable to attend due to a legitimate reason, they or their guardians agree to notify the coach in advance.

Academic Integrity:

The student athlete pledges to complete their school work and maintain at least a C- average across the four core subjects of Math, ELA, Science, and Social Studies. The student athlete is expected to act with honesty and integrity with academic work and when discussing their academic performance with coaches.

Behavior in the Classroom:

The student athlete will exhibit appropriate behavior in the classroom, respecting teachers, peers, and the learning environment. Any behavioral issues reported by teachers may result in the consequences outlined in this contract. Any behavior issues at practice or games may result in the consequences outlined below.

Consequences for Violation:

The club reserves the right to remove any student athlete from the Metro Outlaws Lacrosse Club if they violate this contract. The situation will be reviewed by the coaching staff and Board of Directors. Depending on the severity of the situation, the club may enact a 3-strike rule with the student athlete, or immediately remove them from the club. Any dues paid for the student athlete will be refunded if they are removed from the club.

I, _____, hereby acknowledge that I have read and understand the terms of this behavior contract. I commit to upholding the expectations outlined above and recognize that any violation may result in my removal from the Metro Outlaws Lacrosse Club.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Coach/Staff Signature: _____ Date: _____

This contract is effective as of the signing date and will be active for the duration of the Metro Outlaws Lacrosse Club's spring 2025 season.