

# 2012 New Hampshire Lacrosse Camp

CAMP:            Boys             U15             U13             U11             U9   
                    Girls             U15             U13             U11

Camper Name: \_\_\_\_\_ Parent(s) Name \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone(s): \_\_\_\_\_

Parent email(s): \_\_\_\_\_

School: \_\_\_\_\_ Grade Entering: \_\_\_\_\_ Years Lax Experience \_\_\_\_\_

Position(s) Played: \_\_\_\_\_ NH Lacrosse Camp Alum? Y  N

---

## RELEASE AND WAIVER OF LIABILITY AGREEMENT AND PHOTO RELEASE FORM

I, \_\_\_\_\_ ("Participant"), acknowledge that I have voluntarily applied to participate in the following activities at New Hampshire Lacrosse Camp, LLC (the "Camp"):

**I AM AWARE THAT THESE ACTIVITIES ARE HAZARDOUS ACTIVITIES AND THAT I COULD BE SERIOUSLY INJURED OR EVEN KILLED. I AM VOLUNTARILY ALLOWING MY CHILD TO PARTICIPATE IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.**

**I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND THE "CAMP", THE DIRECTORS, THE COACHES, AND THE LESSOR (UNH), AND SIGN IT OF MY OWN FREE WILL.**

**If Signed by Parent or Guardian: I verify that the dangers of the activities and the significance of this Release and Waiver were explained to the Participant and that the Participant understood them.**

\_\_\_\_\_

PARENT OR GUARDIAN

Date

I agree to allow New Hampshire Lacrosse Camp, LLC to use photos for their future promotional use of my son/daughter \_\_\_\_\_ Parent Initials

---

Please make checks payable to: **New Hampshire Lacrosse Camp, LLC**

Mail application, waiver and check to **1 Main St. Durham \* Suite 16, NH 03824**