



REGISTRATION FORM

Please Print

Last Name: _____ First : _____ Gender: _____
 Street Address: _____ Apt# _____
 City: _____ State: _____ Zip Code: _____
 Telephone Nr: (____) - _____ - _____ Date of Birth: ____ / ____ / ____
 E-mail: _____ @ _____ . _____
 Guardian's Name: _____

RELEASE AND WAIVER

I, _____ acknowledge that I, individually, have voluntarily applied to participate in the Athletic Combine and Lacrosse Competition, known as Battle of the Beltways, offered by Level 2 Sports LLC and conducted by SiSu Systems. I acknowledge the risks and potential risks of participating in the Athletic Combine and Competition. However, I feel that the possible benefits to myself are greater than the risk assumed.

I am aware that although Level 2 Sports, LLC, SiSu Systems, Georgetown University, its subsidiaries and parent companies, its officers, directors, owners and/or employees make reasonable efforts to make each athlete's participation in the Athletic Combine a safe and productive experience, that there are inherent risks which occur as a result of such physical activity, especially at high levels of competition.

I acknowledge that an athlete, when training, through no fault of his/her own, his/her trainer(s) or the facility may become injured for a variety of reasons that are unavoidable.

I represent that I am in good health and suffer from no physical impairment, which would limit my use of Level 2 Sports, LLC, SiSu Systems and Georgetown University facilities or instruction. I further represent that I carry full and complete medical insurance coverage. I acknowledge that Level 2 Sport, LLC, SiSu Systems and Georgetown University has not and will not render any medical services including medical diagnosis of my physical condition.

In consideration of being permitted by Level 2 Sports, LLC and SiSu Systems to participate in its Athletic Combine and to use Georgetown University facilities, I hereby, intending to be legally bound for myself, my heirs and assigns, executors, or administrators and/or guardian of my son/my daughter/my ward specifically agree that Level 2 Sports, LLC and SiSu Systems, its officers, employees and agents shall not be liable for any claim, demand, cause of action of any kind whatsoever for, or on account of death, personal injury, property damage or loss of any kind resulting from or related to my use of the facilities or participation in any Athletic Combine, Lacrosse Competition, Training, Exercise or Activity within or without the club premises, and I agree to hold Level 2 Sports, LLC, SiSu Systems and Georgetown University harmless from same.

In addition consideration of being permitted by Level 2 Sports, LLC and SiSu Systems to participate in its Athletic Combine and to use its facilities, I hereby permit Level 2 Sports, LLC to use my name, image and likeness for promotional purposes limited to its Athletic Combine, Sports Showcase programs and facilities. Level 2 Sports, LLC promotional mediums include but are not limited to print, radio, video, television and the Internet.

I acknowledge that I have read this release and waiver and fully understood its contents. I have been fully and completely advised of the potential dangers incidental to engaging in the activity and instruction of Athletic Combines, Lacrosse Competition and Training and I am fully aware of the legal consequences of signing this release. I voluntarily agree to the terms and conditions stated above.

Athlete's Signature: _____

Parent/Guardian Signature (if Under 18 years of age): _____

Date: ____ / ____ / ____

TEAM NAME: _____