

Snowflake Lacrosse Games Application

- Elementary • Middle School/JV • Varsity

Team Contact:	Ebe Helm - Duke's Lacrosse Club
Contact's Address:	38 Ridley Avenue, Aldan PA. 19018
Contact's Phone #:	610-259-0831

Jersey #	
Name	
High School	
Home Address	
Home Phone	
Email address	
Year	

Below you will find a waiver of liability. Each participating member of a team must fill out the form and turn it in with individual fee in advance or at check in.**

Waiver of Liability

In signing this application, I release Hofstra University from any claims of responsibility from injuries suffered during the Snowflake Lacrosse Games. I knowingly assume all risks associated with participation, even if arising from negligence of the participants or others, and assume FULL responsibility for my participation. I certify I am in good physical condition and can participate in the Hofstra Snowflake Lacrosse Games. Further, I authorize the tournament director to request medical treatment as necessary to insure my well being.

Athlete:	Date:
Parent/Guardian:	Date: