

ADVNC LACROSSE WAIVER

LIABILITY RELEASE, WAIVER, DISCHARGE & COVENANT NOT TO SUE

This is a legally-binding Liability Release, Waiver, Discharge, and Covenant Not to Sue (collectively, the "Release"), made voluntarily by me, on my own behalf, and on behalf of my heirs, executors, administrators, legal representatives, and assigns (collectively, "Participant," "I," "me," "we," or "us," which terms shall also include Participant's parent(s) or legal guardian, if Participant is under 18 years of age) to ADVNC Lacrosse.

I/We hereby give my/our approval for Participant to participate in any and all ADVNC Lacrosse on and off-field activities, including, but not limited to, rafting, ropes courses, and transportation to and/or from those activities (collectively, the "ADVNC Lacrosse Activities"). I/We understand that the Participant's participation in the ADVNC Lacrosse Activities involves potential dangers and risks of injury, both serious and minor, including, but not limited to, head or other injuries or death. Despite these potential dangers and risks, both known and unknown, I/we acknowledge that Participant voluntarily elects to participate in the ADVNC Lacrosse Activities.

With informed consent and in consideration of and in return for the services and other benefits provided to me/us by ADVNC Lacrosse, I/we hereby agree to assume and take on all of the risks, responsibilities, and hazards in any way associated with the ADVNC Lacrosse Activities. I/We further waive, release, absolve, indemnify, covenant not to sue, and agree to hold harmless ADVNC Lacrosse, its Board of Directors, and its stockholders, officers, employees, coaches, and volunteers (collectively, the "Releasees") from any and all liability, causes of action, claims, demands, and actions, of every name and nature, that relate to or arise from any injury, death, loss, or harm to me/us that relates in any way to the ADVNC Lacrosse Activities, to the fullest extent permitted by law. I/We understand that this Release covers liability, causes of action, claims, demands, and actions covered entirely or in part by any negligent acts or failures to act by the Releasees, and I/we recognize that this Release means I am giving up, among other things, rights to sue the Releasees for injuries, damages, or losses that I may incur in connection with the ADVNC Lacrosse Activities.

I/We expressly agree that the Release is intended to be as broad and inclusive as is permitted by law and that if any portion thereof is held invalid, it is agreed that the balance shall continue in full legal force and effect.

I/We grant permission to ADVNC Lacrosse, its Board of Directors and its officers, employees, agents, volunteers or assigns, the irrevocable right to use any photographs or video taken of Participant, me/us, or any member of my/our family for use in any ADVNC Lacrosse publication, such as its website, without prior notification. I/We hereby waive any right to inspect or approve the finished photographs or video, and any right to royalties or other compensation arising from or related to the use of the photographs or video. I/We hereby agree to release, defend, and hold harmless ADVNC Lacrosse, its Board of Directors and its officers, employees, agents, volunteers or assigns from and against any claim, damages or liability arising from or related to the use of the photographs or video.

MEDICAL

I/We, the Participant, or the parent(s) or legal guardian(s) of the Participant, hereby acknowledge my/our responsibility to acquire health insurance coverage sufficient to provide for any and all medical and dental risk services related to injuries, both serious and minor, arising out of or connected with the Participant's activities.

I/We do hereby consent to any X-ray, examination, anesthetic, medical or surgical diagnosis or

treatment and hospital service that may be rendered under the general or special instruction of any licensed physician or surgeon, whether such diagnosis or treatment is rendered on the field, at the office of said physician, during transport to a medical facility, or at a licensed hospital. It is understood that this consent is given in advance of any specific diagnosis or treatment being required, but is given to encourage ADVNC Lacrosse and its authorized representatives and said physician to exercise their best judgment as to the requirements of such diagnosis or treatment.

This consent shall remain in effect until September 1st, 2017.

 I am 18 years of age
(Parent/Legal Guardian signature required if participant is under 18 years of age)

I HAVE READ THIS WAIVER, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Print name

Signature

Date