

**PLAYER INFORMATION:**

**Player Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **ST:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email 1:** \_\_\_\_\_ **Email 2:** \_\_\_\_\_

**Parents Names:** \_\_\_\_\_

**Grade:** \_\_\_\_\_ **Grad Yr:** \_\_\_\_\_ **POS:** \_\_\_\_\_ **Yrs. Experience** \_\_\_\_\_

**Spring Program:** \_\_\_\_\_ **US Lacrosse Number:** \_\_\_\_\_

**PROGRAM INFORMATION |** Team placement be different from Summer 2010 due to open registration.

1. **Cost is \$300 per player + any applicable tournament fees.** | All fees are non-refundable. In the event of an injury, a credit may be issued and will be handled on a case-by-case basis.
2. **Space is limited.** | All roster spaces are first come first served.
3. **Registration includes indoor leagues.** | Fall All Star program includes a space in either the Fall Indoor League at the Peddie School or in Sessions 1 at Turf City. League participation requires a separate application. If interested, check yes under the Tournament Commitment section.
4. **3 Practices in addition to Indoor League Games** | Dates, times and location will be sent out closer to Sept.
5. **Practice Pinnies from this summer along with black shorts will be used as uniforms.**

**AMATEUR ATHLETIC MINOR WAIVER AND RELEASE OF LIABILITY**

In consideration of being allowed to participate in any way in the Tri-State Lacrosse athletics/sports program, and related events and activities, the undersigned:

1. Agree that the parent(s) or legal guardian(s) will instruct the minor participant that prior to participation he or she should inspect the facilities and equipment to be used, and if the participant believes anything unsafe, he or she should immediately advise his or her coach or supervisor of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions, or negligence but the actions, inaction or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assume all the foregoing risk and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Release, waive, discharge and covenant not sue TRI-STATE LACROSSE, its affiliated clubs, their respective administrators, directors, agents, coaches, and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event, all of which are hereinafter referred to as "releasees", from any and all liability to each of the undersigned, his or her heirs and the next of kin for any and all claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise.
5. I give consent to have pictures, video footage and other similar media taken of the participant and agree that such media is the property of Tri-State Lacrosse and may be used to their discretion as needed.
6. I agree to the refund policy.

I / WE HAVE READ THE ABOVE WAIVER, RELEASE, AND REFUND POLICY AND I UNDERSTAND THAT I / WE GIVE UP SUBSTANTIAL RIGHTS

\_\_\_\_\_  
PARENT OR GUARDIAN (SIGNATURE/RELATIONSHIP)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME OF PARENT OR GUARDIAN

\_\_\_\_\_  
PRINTED NAME OF PARTICIPANT

TRI-STATE LACROSSE IS A DIVISION OF TRILAX INC.

Payment Options:     Check (\$\_\_\_\_\_)

Credit Card (\$\_\_\_\_\_ + \$3.00 Processing Fee)

Please make checks payable to & mail to :

VISA OR MASTERCARD ONLY

**TRI-STATE LACROSSE**

1235 Route 23 ♦ Wayne, NJ ♦ 07470

Card # \_\_\_\_\_ Exp Date \_\_\_\_\_

Security Code (3-Digits on Card Back) \_\_\_\_\_ Billing Zip \_\_\_\_\_



PLEASE READ THE FORM CAREFULLY BEFORE COMMITTING. ONCE REGISTERED, THERE ARE NO REFUNDS FOR ANY REASON. **DUE SEPTEMBER 8, 2010** EACH APPLICATION SHOULD INCLUDE:

1. Application Form & Waiver
2. Tournament Commitment Form
3. Full Payment For All Tournaments and Program Fee

**Player Name:** \_\_\_\_\_

**Tournament Commitment Form** | To register for a tournament, check the events you wish to attend and age group.

Y   N	TOURNAMENT INFORMATION	COST	TOTAL
	<b>Princeton 7 v 7 Tiger Challenge</b> TBA   Usually 1 <sup>st</sup> Sunday in October   Princeton, NJ <input type="checkbox"/> 2011   2012 <input type="checkbox"/> 2013   2014 <input type="checkbox"/> 2015   2016	\$100	
	<b>Fall Classic</b> October 8 – 10, 2010   USTC – Downingtown, PA <input type="checkbox"/> 2011   2012 <input type="checkbox"/> 2013   2014	\$130	
	<b>Primetime Showcase</b> Sat. November 6, 2010   Bel Air, MD <input type="checkbox"/> 2012 <input type="checkbox"/> 2013	\$130	
	<b>IAS 7 v 7 Showcase   2011 ONLY</b> November 6 – 7, 2010   New Hampshire 1 or 2 Day Attendance <input type="checkbox"/> Saturday Only <input type="checkbox"/> Sunday Only <input type="checkbox"/> Both Days	One Day \$150 Two Days \$260	
	<b>The Lax Clash</b> Sun. November 7, 2010   Cedar Lane Regional Park, MD <input type="checkbox"/> 2012 <input type="checkbox"/> 2013	\$130	
	<b>Mid Atlantic Tournament</b> November 13 – 14, 2010   Ownings Mill, MD <input type="checkbox"/> 2012	\$150	
	<b>Fall Clash 7 v 7 Tournament</b> November 20 – 21, 2010   Downingtown, PA <input type="checkbox"/> 2014 (Sunday Play) <input type="checkbox"/> 2013 (Sunday Play) <input type="checkbox"/> 2015   2016 (Sat Play)	\$130	
	<b>Tri-State Indoor Box Leagues</b> Application will be sent separately if checked   Location and Dates vary <input type="checkbox"/> Fall @ Peddie <input type="checkbox"/> Sess. 1 @ Turf City	n/a	
<b>TOTAL DUE ( NO LATER THAN SEPTEMBER 8, 2010)</b>			

**Refund Policy** | All tournament and program fees are non-refundable for any reason. In the event of an injury, a credit may be issued on a case-by-case basis. By submitting your application, waiver and tournament commitment form along with payment, you accept these terms. All payments must accompany the application, waiver and tournament commitment form.

**FOR TRI-STATE LACROSSE OFFICIAL USE ONLY**

**PYMT RECEIVED DATE:** \_\_\_\_\_

**AMOUNT:** \_\_\_\_\_ | **CHECK # or APPROVAL CODE** \_\_\_\_\_

