

PARENT CONSENT, WAIVER, & RELEASE: TUCKER LACROSSE CAMPS

NOTICE: THIS IS A LEGALLY BINDING AGREEMENT. Read this document carefully and in entirety. By signing this agreement, you give up your right and the named minor's right to bring a court action to recover compensation, or obtain any other remedy for any personal injury or property damage however caused arising out of the named minor's participation in Tucker Lacrosse, LLC – now, or any time in the future.

Acknowledgment of Risk

I, in my legal capacity as the parent/guardian of the minor named below, do hereby acknowledge and agree that participation in Tucker Lacrosse, LLC activities comes with inherent risks. I have full knowledge and understanding of the inherent risks associated with Tucker Lacrosse, LLC participation, including but in no way limited to: (1) slips, trips, and falls, (2) inadvertent injuries, (3) athletic injuries, and (4) illness, including exposure to and infection with viruses or bacteria. I further acknowledge that the preceding list is not inclusive of all possible risks associated with Tucker Lacrosse, LLC participation and that said list in no way limits the operation of this Agreement.

Coronavirus / COVID-19 Warning & Disclaimer

Coronavirus, COVID-19 is an extremely contagious virus that spreads easily through person-to-person contact. Federal and state authorities recommend social distancing as a mean to prevent the spread of the virus. COVID-19 can lead to severe illness, personal injury, permanent disability, and death. Participating in Tucker Lacrosse, LLC programs or accessing utilized facilities could increase the risk of contracting COVID-19. Tucker Lacrosse, LLC in no way warrants that COVID-19 infection will not occur through participation in Tucker Lacrosse, LLC programs, or of accessing utilized facilities.

In consideration of the Tucker Lacrosse, LLC acceptance of _____ as a participant in the camp, and in return for the opportunity to participate in this camp:

It is agreed that all risks attendant to watching and/or participating in camp activities, including, but not limited to bodily injury, are assumed by the participant and her parents and/or legal guardian and that this assumption is acknowledged, approved, and agreed to by said participant and her parents and/or legal guardian as indicated by the signature hereto. Tucker Lacrosse, LLC has insurance that will cover most injuries/accidents occurring during camp (subject to policy terms, conditions and limits) but **only as secondary coverage** after parent's/guardian's insurance has paid.

I hereby certify that the above named participant is physically able to participate in Tucker Lacrosse Camps and that I know of no physical impairments which would in any manner limit her participation in such a program. I hereby grant permission for physicians, dentists, other licensed health care providers and their designees employed or directed by Tucker Lacrosse Camps to administer outpatient medical, surgical, or dental services as appropriate or necessary antigens or other injections, to perform emergency procedures as necessary, or to refer to other duly licensed medical personnel when necessary.

In consideration for honoring the participant's request to participate, I, for myself, and the participant, as well as my (and the participant's) executors, administrators, and assigns, do hereby release and forever discharge Tucker Lacrosse, LLC, its respective entities, administrators, employees, agents, and participants from any claims that I might have myself or could bring on the participants behalf with regard to damages, demands, or any actions whatsoever, including those based on negligence or failure to supervise, in any manner arising out of the participant's participation in this activity and my watching of this activity. I also hereby agree to save, hold harmless, and indemnify Tucker Lacrosse, LLC and/or its respective entities, administrators, employees, agents and participants against any and all claims, including claims of negligence or failure to supervise, which I might bring myself or could bring on the participant's behalf against them as a result of her participation in the above activity. I recognize that this Release means that I am giving up, among other things, rights to sue Tucker Lacrosse, LLC, its respective entities, administrators, employees, agents or participants for injuries, damages or losses that my child or I may incur.

"Notice: Tucker Lacrosse Camps LLC has leased or rented facilities from the Johns Hopkins University. However, Tucker Lacrosse Camps LLC and any programs operated by Tucker Lacrosse Camps LLC are not related to or affiliated with the Johns Hopkins University in any way. Tucker Lacrosse Camps LLC is an entirely separate legal entity with no connection to the Johns Hopkins University aside from the temporary use of facilities for the specified program."

MEDICAL INSURANCE INFORMATION

Insurance Provider: _____ **Phone #:** _____

Group and ID #: _____

Medical History: _____

Medications: _____

Other Special Considerations: _____

Parent Name: _____ **Contact #:** _____

Emergency Contact Name and Phone #: _____

Please note: Our camp medical staff may request additional information (e.g., documentation from the camper's treating physician) to review prior to the camper being permitted to participate in camp. If you have questions prior to camp, contact us at tuckerlax4@gmail.com