



Westside Lacrosse Association Participation Form

P.O. Box 771420, Lakewood, Ohio 44107

Fax this form to: +216-226-0027

- New
- Renew
- Correction

League: Grade 5/6; Grade 7/8

Play hockey? No Yes

Last Name: _____ Phone: () _____

First Name: _____ Date of Birth: _____

Address//Zip: _____

E-Mail Address: _____

Parent(s): _____

List any medical problem or prohibition the player has: _____

Person to notify in an emergency: _____ Phone: _____

IMPORTANT

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the Westside Lacrosse Association (WLA), its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with lacrosse and in consideration for the WLA accepting the registrant for its lacrosse programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify the WLA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

Parent / Guardian Signature: _____

Name (Print): _____ Date: _____

Parental Support

As we move forward in the the continued development of this new league will call for adult volunteer participation. Check areas in which you would consider willing to help:

- Coach
- Assistant Coach
- Team Manager
- Equipment Sponsor
- Field Preparation / Set-up
- Board Member
- Newsletter
- Other:

Consent of Medical Treatment (Minor)

As the parent or legal guardian for the above-named player, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.

Parent Signature: _____

Home Phone: _____ Business: _____

Player Fees

Spring 2007 Fee	
Returning Player	\$125.00
New Player	\$125.00

See Web Site for Equipment Orders

Note: US Lacrosse membership is a separate fee of \$20 per year.

Recorder	<input type="checkbox"/> Cash
	<input type="checkbox"/> Check # _____