



21st Annual NYLA Boys High School Summer Showcase (Saturday, June 8th, 2024)
WAIVER OF LIABILITY AND CONSENT OF PARENT OR GUARDIAN

REQUIRED: A WAIVER MUST BE ON FILE TO PARTICIPATE

I, hereby grant permission for my child(ren)'s (THE UNDERSIGNED BELOW) participation in all activities, athletic or otherwise, sponsored by the New York Lacrosse Academy (NYLA), the County of Nassau, the Town of Farmingdale, the State of New York, SUNY Farmingdale, their members, officers, and staff any third party representative and release from responsibility said corporation(s) and member(s) for any injuries sustained by him or expenses incurred there from, while engaged in any activity. The New York Lacrosse Academy, the County of Nassau, the Town of Farmingdale, the State of New York, SUNY Farmingdale, their members, officers, and staff and any third party representative are not responsible for any lost or stolen items that may occur and will not be held responsible for such.

To the best of my knowledge, I/my child/my children am/is/are in good physical condition and I am not aware of any physical infirmity which would place me/my child at risk to participate in any way with the activity. During the period of the Showcase, I hereby give permission for the training staff onsite or this activity to administer appropriate medical attention to me/my child/my children in the event of an accident, illness, or injury. I will be responsible for any and all costs of medical coverage and treatment provided not covered by insurance.

NYLA has put in place preventative measures to reduce the spread of COVID-19; however, NYLA CANNOT GUARANTEE that you or your child(ren) will not become infected with COVID-19. By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending today's event and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Showcase may result from the actions, omissions, or negligence of myself and others, including, but not limited to, NYLA's employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at the Business or participation in Business programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless NYLA, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating there to. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of NYLA, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any NYLA program.

Player's Name: _____

Parent Guardian's Name (Print): _____

Signature of Parent/Guardian: _____ **Date:** _____