Boys Lacrosse
Summer League 2008

League Dates: 6/17, 6/24, 7/8, 7/15, 7/22, 7/29

Player Name _____School:_____ Preferred Team: _____

Address: _____ Parent/Guardian: _____

City: _____ State _____ Zip _____ Birthdate: ____/____/____ Age:____ Gender: M F

Day Phone: _____ Evening Phone: _____Emergency Phone: _____

Email (Mandatory):_____

If currently a United Sports Member check this box: ☐ **Membership #:** _____ **Exp Date:** _____

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL CONSENT AGREEMENT

I hereby release and discharge United Sports Training Center ("USTC"), its agents, employees, staff members, directors, and officers from any claims, responsibilities or liabilities for injuries or harm incurred as a result of my participation and/or my child's participation as a player or spectator in programs and activities, including rock wall activities at USTC.

I fully understand that: these activities involve risks and dangers of serious bodily injury, ("RISKS"); these Risks and dangers may be caused by my own actions or inaction's, the actions or inaction's of others participating in the activity, the condition in which the activity takes place, or the negligence of the "RELEASEES" named below; there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation or that of the minor in the Activity.

I authorize USTC, its agents, employees, staff members, directors and officers to take whatever action is necessary, in their best judgment, in an emergency and I hereby release discharge USTC, its agents, employees, staff members, directors and officers from any responsibility or liability related thereto. I hereby grant USTC permission to use my and/or my child's name, picture or likeness in any printed media or any form of advertisement. I fully renounce any and all claims upon USTC for reimbursement for use of this material.

Participant/Guardian Signature: _____ Date____/____/_____

Summer League Registration Deadline is June 3, 2008

Divisions (please check one)

_____VARSITY
_____JUNIOR VARSITY
_____MIDDLE SCHOOL

Payment Information:

Please circle card type: VISA MasterCard

Credit Card #:

Expiration Date _____ **League Fee** _____

Total Amount Due: _____

Cardholder Signature:_____

Check # _____ **Cash:** _____

Cash or Check Amount:_____

CHECK POLICY: $25.00 service fee for returned checks.

All checks should be made payable to "USTC" and mailed to:
United Sports Training Center
1426 Marshallton-Thorndale Road
Downingtown, PA 19335

League Information

6 weeks of games!
Dates: 6/17, 6/24, 7/8, 7/15, 7/22, 7/29
Rain date: 8/5
Game times are 6, 7, and 8pm
Each game is two 25 minutes halves!

Registration Information:

Player Fee: $50.00
(minimum of 20 players per team)
Individual Registrant $60.00 per player

$20.00 late fee charge per player if received after June 3, 2008

Summer Lacrosse League 2008

For More Information Please Contact:
LAXEVO@go2ustc.com
610-466-7100 or 610-466-9314 (fax)

Refunds will only be issued if requested in writing and two weeks prior to the start of any program. A $20.00 administrative fee will be deducted from the amount paid. If a refund request is made in writing after this two-week period a refund, minus a $20.00 administration fee, will be made in the form of a **tuition credit only.** No refunds will be made after the program has started.