JSSLL 2020

Harvest League Application

Boys High School League

• Circle one:	Team Application	Individual Application
your informat	m application team repre ion and attach list of tean nembers information and	
Name	Position	n(s)DOB//
Address	City	StateZIP
Phone (Home)	Cell	
EmailSchool/ Team		
U S Lacrosse member	? YesNo	
League Fees:Ir	idividual: \$150.00	
T	Team: HS \$2200.00	
Make chec	cks payable to JSSLLLC and se	end to:
Mike Dow	vd JSSLLLC 388 Harper Avenu	ie Brick NJ 08724
Visa and	Master Card Amex Discover ac	cepted by phone 732 330-2659
VENMO -	- ekimdwod	
GAMES S	SUNDAYS SEPTEMBER 13 –	OCTOBER 27

Players will not be permitted to participate without the following signed AMATEUR ATHELETIC MINOR WAIVER AND RELEASE OF LIABILITY.

In consideration of being allowed to participate in any way in the Jersey Shore Summer Lacrosse League/Harvest League, the undersigned:

- 1. Agree that the participant will prior to participation inspect the facilities and equipment to be used, and if the participant believes anything unsafe, he or she should immediately advise the 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, inactions 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 covenanant not sue Jersey Shore Lacrosse LLC and it's 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 leassors 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 in whole or in part by the negligence of the releasees or otherwise. I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I/WE GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

Waiver/Release for Communicable Diseases Including COVID-19

In consideration of being allowed to participate in the Jersey Shore Summer Lacrosse LLC's Harvest League, the undersigned acknowledges, appreciates, certifies and agrees that:

- 1. My participation includes possible exposure to and illness from infectious diseases, including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness, injury, and death does exist.
- 2. If I have a pre-existing health condition, exposure to COVID-19, or any other infectious disease may be more likely to cause serious illness, injury, or death;
- JSSLLLC cannot ensure that all other participants, including coaches and volunteers, are
 taking precautionary measures to mitigate risks to ensure the health and safety of other
 participants, coaches, and volunteers, and therefore, participation in the War at the Shore
 involves risk of exposure to infectious disease; and,
- I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
- 5. I certify that I have not recently tested positive for, and am not exhibiting symptoms of COVID-19, which include a cough, shortness of breath or difficulty breathing, loss of taste or smell, headache, chills, muscle or body aches and/or sore throat.
- 6. I certify that I do not have a household family member/roommate who has recently tested positive for or exhibited the above-referenced symptoms of COVID-19.
- 7. I willingly agree to comply with all recommendations to ensure safe play. If, however, I

- observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest coach, staff member or volunteer, or official immediately; and,
- 8. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Jersey Shore Summer Lacrosse LLC, and their officers, officials, agents, and/or employees, other participants, volunteers, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AN UNDERSTAND ITS TERMS, UNDERSTAND THAT SIGNING IT, AND SIGN IT FREELY AND VOLUM	TI HAVE GIVEN UP SUBSTA	ANTIAL RIGHTS BY
Name of participant:	Participant signature:	Date signed:
FOR PARTICIPANTS OF MINORITY AGE (UNDE	R AGE 18 AT THE TIME OF	REGISTRATION)
This is to certify that I, as parent/guardian, with legal explained the provisions in this waiver/release to my participation and his/her personal responsibilities for against communicable diseases. Furthermore, my charesponsibilities. I for myself, my spouse, and child/wabove for all the Releasees and myself, my spouse, a hold harmless the Releasees for any and all liabilities participation in these activities as provided above, Explained.	child/ward including the risks adhering to the rules and regulation individual to the rules and accept and do consent and agree to heard child/ward do release and incident to my minor child's/w	of presence and ulations for protection epts these risks and is/her release provided agree to indemnify and ward's presence or
Name of parent/guardian:	Parent	guardian/signature:
	_ Date signed:	