



# SANDPOINT CLUB LACROSSE

Coach Guida  
P.O. Box 254  
Sandpoint, ID 83864  
208.265.5357

## Player Emergency Contact information that is taken to games (Please Print)

Athlete's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Init: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Grade: \_\_\_\_\_ Height (approx): \_\_\_\_\_ Weight (approx): \_\_\_\_\_ Shirt size: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Parent (Guardian) Information (if under 18 years old):

Mother's Name: \_\_\_\_\_ hm phone: \_\_\_\_\_ wk phone: \_\_\_\_\_ cell: \_\_\_\_\_

Father's Name: \_\_\_\_\_ hm phone: \_\_\_\_\_ wk phone: \_\_\_\_\_ cell: \_\_\_\_\_

Player resides with? \_\_\_\_\_ (mother/father/both)

Since his/her last athletic physical examination, has this player:

	Y	N	Explain Yes
1. Had surgery			
2. Been hospitalized			
3. Been under a physician's care			
4. Had a serious illness			
5. Had an injury requiring a physician's care			
6. Been rendered unconscious			
7. Started taking any new medications			
8. Developed any new drug allergies			
9. Developed any health problems			

My child \_\_\_ should \_\_\_ or should not have a physical examination prior to participation in high athletics.

Do you have health insurance?: \_\_\_yes; \_\_\_no. If no, your child will be covered by the North Idaho Lacrosse program for a maximum of \$25,000 with a \$100 deductible.

If yes:

Insurance Company \_\_\_\_\_

Insurance Policy Number \_\_\_\_\_



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## Sandpoint Club Lacrosse Activity Contract

I am aware that athletics are violent contact sports and that playing or practicing will be a dangerous activity involving MANY RISKS AND INJURY. I understand that the dangers and risks of playing or practicing in athletics include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons and other aspects of the muscular skeletal system and serious injury or impairment to other aspects of my body, general health and well being. I understand that the dangers and risks of playing or practicing in interscholastic athletics may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities, and generally to enjoy life.

Because of the dangers of interscholastic athletics, I recognize the importance of following the coaches' instructions regarding playing techniques, training and other team rules, etc., and agree to obey such instructions.

In consideration of Sandpoint Club Lacrosse permitting me to play in the Sandpoint Club Lacrosse program and to engage in all activities related to the program, but not limited to playing lacrosse I hereby assume all the risks associated with lacrosse and agree to hold the Sandpoint Club Lacrosse program, agents, representatives, coaches and volunteers harmless from any and all liability, actions, causes of action, debts, claims or demands of any kind and nature whatsoever which may arise by or in connection with my participation in any activities related to a high school team. The terms hereof shall serve as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and for all members of my family.

I will be on time to practice and ready to play or suffer the consequences. I will always bring all my equipment including a ball. I will never talk back to any coaches or any adults. I will respect my teammates and opponents. I will not use profanity at practice or games. I will only speak encouragingly to my teammates. I will help set up the fields for practice and games. I will maintain a healthy attitude toward the game, and I will keep my grades up. I will not use tobacco, alcohol or drugs, or I will be expelled from the team. If I am renting gear for the season, I will take care of my gear and keep it clean and undamaged. I understand that normal wear and tear and not considered damage.

Date \_\_\_\_\_ Signature of Student \_\_\_\_\_

I \_\_\_\_\_ am the parent/legal guardian of \_\_\_\_\_ (player). I have read the above warning and release and understand its terms. I understand that interscholastic athletics are VIOLENT CONTACT SPORTS involving many RISKS OF INJURY, including but not limited to those risks outlined above.

In consideration of Sandpoint Club Lacrosse permitting my child/ward to try out for the Sandpoint Club Lacrosse and to engage in any activities related to the program, including, but not limited to, trying out, practicing or playing in interscholastic athletics, I hereby agree to hold the Sandpoint Club Lacrosse program, agents, representatives, coaches and volunteers harmless from any and all liability, actions, causes of actions, debts, claims, or commands of every kind and nature whatsoever which may arise by or in connection with participation of my child/ward in any activities related to a club team. The terms hereof shall serve as a release for my heirs, estate, executor, administrator, assignees and for all members of my family.

If my child has rented gear from the club, it will be returned undamaged and in full at the end of the season or I am responsible for replacement costs. I understand that normal wear and tear and not considered damage.

Date \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_