

Indoor Lacrosse League/Learn To Play Registration Form

Mail To: The Summit, Lacrosse League, 9410 Davis Hwy. , Dimondale, Mi. 48821 or FAX: 517-319-1004



Name _____ DOB _____ Grade _____

Address _____ City _____ ZIP _____

Phone (H) _____ (W) _____ (C) _____

EMAIL _____ GENDER (Circle One) MALE FEMALE

(Circle enrollment choices) Summer Session - "Learn To Play" \$100

Fall/Winter LEAGUE AGE DIVISIONS - \$75 per person (Fall/Winter Teams \$750)

1st-3rd gr(COED); 4th-6th(COED); Gr.7-9 Boy/Girl; High School (Age 15 up) Boy/Girl

Session 3 - Tues, Thurs - 3 on 3, (April 17 thru May 22) Individual Sign Up Only

Credit Card # _____ Exp. _____ Check or M.O. # _____

Name on C.Card _____

Check Amount _____ Check Number _____

Release and General Waiver

The undersigned (hereinafter "participant") acknowledges and agrees that the risk of injury from activities engaged in at the facilities known as The Summit at Capital Centre and/or Aim High Sports are significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist. The PARTICIPANT KNOWINGLY AND FREELY ASSUMES ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF The Summit at Capital Centre and/or the Aim High Sports facility. The participant assumes full responsibility for the participation by the participant in any and all such activities. The participant willingly agrees to comply with the stated and customary terms and conditions for participation in any and all such activities engaged in at The Summit at Capital Centre and/or the Aim High Sports Facility. If, however, the participant observes any unusual significant hazard during his/her presence or participation, the participant will remove himself or herself from the participation and bring such hazard to the attention of an authorized representative of The Summit at Capital Centre and/or Aim High Sports. Further, the participant, for himself or herself, and his or her heirs, assigns, personal representatives, and next of kin, hereby releases, indemnifies and holds harmless Capital Centre Operating, L.L.C., The Summit at Capital Centre, Aim High Sports, and their owners, officers, employees, instructors, officials, agents, other users, sponsors, advertisers, affiliates, and the property owners of the real property upon which

facilities of The Summit at Capital Centre or Aim High Sports is located (“Releasees”), from all claims with respect to any and all injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the Releasees or others involving activities at The Summit at Capital Centre and/or Aim High Sports.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

_____ Age _____

Participant Name (Please Print)

_____ Date _____

Participant’s Signature (Parent Signature if participant is under 18)