

TRIAD “STICK IT TO HUNGER” CHARITY LACROSSE CLASSIC (Dec 5 & 6, 2020)
CODE OF CONDUCT, WAIVER, AND RELEASE

In consideration of the undersigned’s participation and attendance at the Triad “Stick it to Hunger” Charity Lacrosse Classic (the “Event”), the undersigned player and his parent/guardian agree as follows:

1. **Conduct.** All players, parents, and fans will always **respect participants, fans, coaches, officials, the Event, and the game of lacrosse.** Players, parents, and fans **shall not curse, bully, trash-talk, or engage in demeaning behavior of any kind.** Each player, parent, and fan shall maintain a **positive atmosphere** at the Event and shall **refrain from negative fan behavior** such as open criticism of or negative discourse with players, coaches, officials, or other fans.
2. **Medical Condition.** The player is in good physical condition and will participate in the Event only to the extent that he is physically, emotionally, and psychologically prepared. The undersigned hereby give their consent to the Triad Blackhawks to provide customary medical and/or athletic training attention, transportation, and emergency medical services as are deemed appropriate in the discretion of the Triad Blackhawks.
3. **Photo Release.** The undersigned hereby grant to the Triad Blackhawks the right to take photographs of the undersigned in connection with the Event and the right to use such photographs of for any lawful purpose, including publicity, advertising, and Web content.
4. **Food Donation.** Each player understands and agrees that they shall donate **a standard paper grocery bag of non-perishable food** to the tournament upon arrival at the Event in accordance with tournament guidelines.
5. **COVID-19 and Other Infectious Diseases.** Participation in the Event includes possible exposure to and illness from infectious diseases, including but not limited to MRSA, influenza, and COVID-19. While rules and personal discipline may reduce this risk, the risk of serious illness, injury, and death does exist. The Released Parties 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 Event involves risk of exposure to infectious disease. 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. 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. 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. I agree to comply with all recommendations or safeguards provided by the Triad Blackhawks or others 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. I understand that the Release and Indemnity below is fully applicable to all matters related to COV-19 and other infectious diseases.
6. **Release and Indemnity.** In consideration of participating in the Event, each participating player and his parent/guardian do hereby agree for themselves, their heirs, executors and administrators, to **RELEASE, HOLD HARMLESS, and FOREVER DISCHARGE** the Triad Blackhawks, Winston-Salem/Forsyth County Schools, Town of Kernersville, tournament sponsors and concessionaires, and their respective officers, staff, administrators, volunteers, sponsors and representatives and assigns (collectively, the “Released Parties”), for and against any and all claims, actions, cause of actions, suits, judgments, and demands whatsoever arising directly or indirectly in connection with the player’s or parent/guardian’s participation in or attendance at the Event, including but not limited to possible exposure to and illness from infectious diseases as mentioned above. The undersigned player and parent/guardian are **FULLY AWARE AND APPRECIATE THE RISKS, AND ACCEPT AND ASSUME RESPONSIBILITY FOR SAME**, including the risk of a catastrophic injury, paralysis and even death, as well as other damages and losses associated with participation in a lacrosse event. The undersigned acknowledge that each of them has read and understand this form and agree to all its terms and further understand the terms herein are contractual and not a mere recital.

Player Printed Name Player Date of Birth

Parent/Guardian Printed Name

Player Signature

Parent/Guardian Signature

Date

Date