## PROSPECT CAMP WAIVER

I verify that my child has been checked by a licensed physician and is physically able to participate in the Prospect Camp at Washington and Lee run by Play Great Lacrosse LLC. My child may participate in all activities associated with this event. I give permission for my child to be treated by a qualified athletic trainer, certified nurse practitioner, or licensed physician. I further agree that Play Great Lacrosse LLC shall be held harmless from and indemnified against any and all liability, cost, claims, loss or damage which it may incur as a result of any accident or injury to my child. In addition, I understand that attendance at a prospect lacrosse camp carries certain risks of injury and I assume all risks resulting from participation in this camp. I understand that the camp is not operated or controlled by Washington and Lee University will hold harmless Washington and Lee University, its Trustees, officers, employees, agents, and any and all affiliated departments from any and all liability, causes of action, claims, and demands of every kind of nature whatsoever which may arise in connection with or resulting from participation in any of the camp activities. I understand that participation at this prospect camp does not constitute admission to Washington and Lee, or athletic support in the admission process.