



## 2019 Lions' Pride Boys' Lacrosse Camp

**What:** Howard Lacrosse Camp

**When:** July 8-11 (Monday-Thursday): 9-12 Noon

**Where:** Howard H.S. (Meet on Stadium Field @ 8:45AM)

**For:** Boys' Lacrosse Players: Entering Grades 3-9

**Clinic Fee:** \$150/Player: *Make Checks Payable to: Lions' Pride-Boys' Lacrosse Camp*

**Details:** Registration is being accepted for the 2019 Howard Lacrosse Camp. All participants will need all equipment. Get some quality instruction from Head Coach Jimmy Creighton; we will cover all basic skills for offense, defense and goalies. Creighton will be joined by Howard lacrosse players. *Walk-Ups will be accepted.*

**Please fill the following form out w/ payment enclosed and send to: Howard High School, Attn: Coach Creighton, 8700 Old Annapolis Road, Ellicott City, MD, 21043**

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### 2019 Lions' Pride Boys Lacrosse Camp Waiver

In consideration of the Lions' Pride Boys' Lacrosse Camp acceptance of \_\_\_\_\_ as a student enrolled in the camp for the period of dates mentioned above, and in return for the opportunity to participate in this clinic:

It is agreed that all risks attendant to watching and/or participating in clinic activities, including, but not limited to bodily injury, are assumed by the student and his parents and/or legal guardian and that this assumption is acknowledged, approved, and agreed to by said student and his parents and/or legal guardian as indicated by the signature hereto. Lions' Pride, LLC will be financially responsible for and has insurance that will cover most injuries/accidents occurring during the clinic, but only as secondary coverage after parent's/guardian's insurance has paid.

I hereby certify that the above named camper is physically able to participate in the Lions' Pride Boys' Lacrosse Camp, LLC, and that I know of no physical impairments which would in any manner limit his participation in such a program. In consideration for honoring my child's request to participate in the above activity, I, for myself, my executors, administrators, and assigns, do hereby release and forever discharge Lions' Pride, LLC, James Creighton or administrators, faculty members, employees, agents, and students from any claims that I might have myself or could bring on my child's behalf with regard to damages, demands, or any actions whatsoever, including those based on negligence or failure to supervise, in any manner arising out of my child's participation in this activity. I also hereby agree to save, hold harmless, and indemnify Lions' Pride, LLC, James Creighton or administrators, faculty members, employees, agents, and students against any and all claims of negligence or failure to supervise, which my child might bring against them as a result of his participation in the above activity.

I recognize that this Release means that I am giving up, among other things, rights to sue Lions' Pride, LLC, James Creighton or administrators, faculty members, employees, agents, and students for injuries, damages or losses that my child may incur.

\_\_\_\_\_  
Parent or Legal Guardian Print Name

\_\_\_\_\_  
Parent or Legal Guardian Sign Name

\_\_\_\_\_  
Date

Parent E-Mail: \_\_\_\_\_

Emergency Contact #: \_\_\_\_\_