Virginia United Girl's Lacrosse Liability Waiver Form

As parent or guardian of	
(print player name), I give my consent and approval for my dau	_
participation in the Virginia United Girls Lacrosse Program. I a	_
my consent to have my daughter practice on the grounds of al	
facilities determined by the Virginia United Girls Lacrosse Prog do hereby grant permission for participation in all activities, ath	
otherwise, sponsored by Virginia United Girls Lacrosse Progra	
release from responsibility said organization, staff, third party	iiii aiia
organizations (facility, equipment manager, trainer) for any inju	ıries
sustained by her or expenses incurred there from, while engage	ged in
any activity. I acknowledge that my daughter can participate in	
Virginia United activities and is in good health. Virginia United	
Lacrosse Program will not be responsible for loss and damage property. Please sign indicating you have read and agree to the	
above. If sent through e-mail I agree by Parent On-Line signat	
below. Please sign on the following line indicating you have re	
agree to the above.	
Parent signature	
Print	
Data	
Date	
Player signature	
Player signature	