



2009 Bridge Membership Registration Form

BRIDGE ORGANIZATION/TEAM NAME: The Bobby Campbell Lacrosse Foundation, Inc. dba Trenton Bridge Lacrosse

Participant Contact Information

Current USL Member #:	Date of Birth:	Home Phone:
First Name:	Middle Name:	Last Name:
Street Address:	APT #:	EMAIL:
City:	State: NJ	Zip Code:

Membership Category: \$35 membership fee (Payable to The Bobby Campbell Lacrosse Foundation, Inc.)

Parent/Guardian Information

Parent/Guardian #1 Name:	Relation to Player:
Work Phone:	Cell Phone:
EMAIL:	
Parent/Guardian #2 Name:	Relation to Player:
Work Phone:	Cell Phone:
EMAIL:	

Emergency Contact Information (must be different than parent/guardian)

Emergency Contact #1 Name:	Relation to Player:
Phone Number:	Cell Phone:
Emergency Contact #2 Name:	Relation to Player:
Phone Number:	Cell Phone:

Additional Information

Gender: Boy Girl	Race/Ethnicity:
School:	Grade:
Attends Boys and Girls Clubs at:	Shoe Size:
Primary Language Spoken at Home:	T-Shirt Size: YM YL YXL AS AM AXL

Medical Information

Allergies:	Medications:
Additional Medical Concerns:	
Primary Care Physician:	Physician's Phone:
Primary Medical Insurance Provider:	Policy Number:
Name of Policy Holder:	

Transportation Information

My child (circle one) will / will not need transportation to practice

On most days, after practice and games, my child will

___be picked up at Village Charter School ___be picked up at a Boys & Girls Club Location ___walk home

If applicable, please tell us who specifically should not be allowed to pick up your child: _____

ENROLLMENT FORM AND MEMBER AGREEMENT

US LACROSSE AND THE POSITIVE COACHING ALLIANCE

Lacrosse is the oldest American sport. Native Americans played lacrosse centuries ago, long before our colonies were settled. Through lacrosse, Native Americans celebrated and emphasized their spiritual and cultural values. In an effort to promote appropriate values in the modern game, US Lacrosse has partnered with the Positive Coaching Alliance to promote positive coaching and good sportsmanship at all levels of the lacrosse. US Lacrosse has included the following "Lacrosse Code of Conduct" as part of its membership application to encourage and foster appropriate values in players, coaches, parents, officials and spectators. US Lacrosse believes that it should be a priority of every lacrosse player, team, program and league to "Honor the Game".

US LACROSSE CODE OF CONDUCT

Players, coaches, officials, parents and spectators are to conduct themselves in a manner that "Honors the Game" and demonstrates respect to other players, coaches, officials, parents and fans. In becoming a member of the lacrosse community an individual assumes certain obligations and responsibilities to the game of lacrosse and its participants. The essential elements in this "Code of Conduct" are HONESTY and INTEGRITY. Those who conduct themselves in a manner that reflects these elements will bring credit to the sport of lacrosse, themselves, their team and their organization. It is only through such conduct that our sport can continue to earn and maintain a positive image and make its full contribution to amateur sports in the United States and around the world. US Lacrosse supports the following behaviors for those who participate in the sport or are involved in any way with US Lacrosse. The following essential elements of the "Code of Conduct" must be followed:

- Sportsmanship and teaching the concepts of fair play are essential to the game and must be taught at all levels and developed both at home and on the field during practices and games.
- The value of good sportsmanship, the concepts of fair play, and the skills of the game should always be placed above winning. • The safety and welfare of the players are of primary importance.
- Coaches must always be aware of the tremendous influence they have on their players. They are to strive to be positive role models in dealing with young people, as well as adults.
- Coaches should always demonstrate positive behaviors and reinforce them to players, parents, officials and spectators alike. Players should be specifically encouraged and positively reinforced by coaches to demonstrate respect for teammates, opponents, officials and spectators.
- Players should always demonstrate positive behavior and respect toward teammates, opponents, coaches, officials, parents and spectators.
- Coaches, players, parents and spectators are expected to demonstrate the utmost respect for officials and reinforce that respect to players/teammates. Coaches are also expected to educate their players as to the important role of lacrosse officials and reinforce the ideal of respect for the official to players/teammates.
- Grievances or misunderstandings between coaches, officials or any other parties involved with the sport should be communicated through the proper channels and procedures, never on or about the field of play in view of spectators or participants.
- Officials are professionals and are therefore expected to conduct themselves as such and in a manner that demonstrates total impartiality, courtesy and fairness to all parties.
- Spectators involved with the game must never permit anyone to openly or maliciously criticize badger, harass or threaten an official, coach, player or opponent.
- Coaches must be able to demonstrate a solid knowledge of the rules of lacrosse, and should adhere to the rules in both the letter and the spirit of the game.
- Coaches should provide a basic knowledge of the rules to both players and spectators within his/her program. Attempts to manipulate rules in an effort to take unfair advantage of an opponent, or to teach deliberate unsportsmanlike conduct, is considered unacceptable conduct.
- Eligibility requirements, at all levels of the game, must be followed. Rules and requirements such as age, previous level of participation, team transfers, etc, have been established to encourage and maximize participation, fair play and to promote safety.

Signature Required for Acceptance of Membership

In consideration of my membership in US Lacrosse, and my participation in US Lacrosse sanctioned, recognized or sponsored events ("Covered Events"), I agree to the following: **1. Waiver and Release:** I am fully aware of and appreciate the risks, including the risks of catastrophic injury, paralysis and even death, as well as other damages and losses, associated with participation in a lacrosse event. I agree on behalf of myself, my heirs and personal representatives, that US Lacrosse, the host organization and the sponsor or sponsors with respect to a Covered Event, together with coaches, officials, volunteers, employees, agents, officers and directors of the host organization and any such sponsors shall not be held liable for any injury, loss of life or other loss or damage as a result of my participation in a Covered Event. This Waiver & Release shall also be for the benefit of and run in favor of any youth organization that requires participants to become members of US Lacrosse as a condition to their participation in such organization's youth lacrosse events, which shall constitute Covered Events for purposes of this Waiver & Release, and any such youth lacrosse league shall constitute the host organization for such Covered Events.

2. Medical Attention: I hereby give my consent to US Lacrosse and the host organization of any Covered Event to provide, through a medical staff of its choice, customary medical/athletic training attention, transportation and emergency services as warranted in the course of my participation in Covered Events. **3. Readiness to Compete:** I will only participate in those Covered Events in which I believe I am physically and psychologically prepared to compete. **4. Information Certification:** I certify that all information provided by me in this application, including without limitation my membership category, is true, accurate and complete and I understand that any untrue, inaccurate or incomplete statement or information will automatically invalidate my membership and all of the benefits of membership in US Lacrosse. **5. Code of Conduct:** I agree to all terms on this form (refers to accepted US Lacrosse/Positive Coaching Alliance Code of Conduct).

Signature: _____

Date: _____

If Participant is under 18, please read and sign below:

As parent or legal guardian of this participant, I hereby verify by my signature below that I fully understand and accept each of the above conditions.

Signature of Parent/Guardian: _____ Date: _____ Printed name of Parent/Guardian: _____



Waiver and Release: As a condition to, and in consideration for, allowing **my child**, _____, to participate in activities organized, sponsored, or sanctioned by The Bobby Campbell Lacrosse Foundation, Inc. dba Trenton BRIDGE Lacrosse, I (i) give permission to Trenton BRIDGE Lacrosse coaches and staff to supervise Trenton BRIDGE Lacrosse-related activities and travel of my son/daughter, and (ii) give my permission and consent to Trenton BRIDGE Lacrosse and any host organization to provide, through a medical staff of its choice, customary medical/athletic training attention, transportation and emergency medical services as warranted in the course of my son/daughter's participation in Trenton BRIDGE Lacrosse sanctioned events. I am fully aware of and appreciate the risks, including the risk of catastrophic injury, paralysis and even death, as well as other damages and losses associated with my child's participation in Trenton BRIDGE Lacrosse sanctioned events, including but not limited to lacrosse competition, camps, field trips and transportation. I agree on behalf of myself, my child, and our heirs, and/or personal representatives, that Trenton BRIDGE Lacrosse, the host organization, and sponsors/hosts of any Trenton BRIDGE Lacrosse sanctioned event, including but not limited to the facilities of the Village Charter School and the Boy's and Girl's Club of Trenton, along with the coaches, volunteers, employees, agents, officers, directors of those organizations, and any medical staff and trainers (as specified above), shall not be liable for any injury, loss of life, loss of property, or other loss or damage occurring as a result of my child's participation in any Trenton BRIDGE Lacrosse sanctioned events. I also agree that neither The Bobby Campbell Lacrosse Foundation, Inc dba Trenton BRIDGE Lacrosse nor its employees, staff coaches or volunteers will be responsible for my child after practice and/or camp hours and they shall not be responsible for releasing my child to specific individuals.

Transportation Waiver: I understand that the Bobby Campbell Lacrosse Foundation, Inc dba Trenton BRIDGE Lacrosse will not be legally responsible for my son/daughter before or after practice hours and games. I also understand that the Bobby Campbell Lacrosse Foundation, Inc dba Trenton BRIDGE Lacrosse will not be responsible for releasing participants to specific individuals or for transporting my son/daughter on practice days.

Photo and Quotation Waiver: I hereby give permission to the Bobby Campbell Lacrosse Foundation, Inc dba Trenton BRIDGE Lacrosse to reproduce any quotation, photograph or video of my son/daughter while participating in any on- or off-field Trenton BRIDGE Lacrosse sanctioned activity. Photograph and/or video reproductions may appear, at no cost to the Bobby Campbell Lacrosse Foundation, Inc dba Trenton BRIDGE Lacrosse, in program reports, grants, newsletters, on the Bobby Campbell Lacrosse Foundation, Inc or Trenton BRIDGE Lacrosse website, in marketing materials, and in local/national publications.

Parents/Guardians: As legal parent or guardian of this participant, I hereby verify by my signature below that I fully understand and accept each of the above conditions for permitting my child to participate in any Bobby Campbell Lacrosse Foundation, Inc dba Trenton BRIDGE Lacrosse sanctioned and/or sponsored activity. I also acknowledge and agree that this Participation Waiver shall remain in effect until I revoke it by written notice to the Bobby Campbell Lacrosse Foundation, Inc dba Trenton BRIDGE Lacrosse or until I sign a new Participation Waiver at a later date.

Participant Name

Date

Signature of Parent/Legal Guardian

Printed Name of Parent/Legal Guardian

BRIDGE MEMBERSHIP REGISTRATION FORM ~ 2009

BRIDGE ORGANIZATION/TEAM NAME: _____

CURRENT USL MEMBER #: _____ DATE OF BIRTH (mandatory for 2009): _____

FIRST NAME: _____ MIDDLE: _____ LAST: _____

STREET ADDRESS: _____ APT/STE #: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: _____ HOME EMAIL: _____

WORK PHONE: _____ WORK EMAIL: _____

EMERGENCY CONTACT NAME: _____ EMERGENCY NUMBER: _____

MEMBERSHIP CATEGORY: \$35.00 Membership Fee

BRIDGE PROGRAM PLAYER

MEMBERSHIP AGREEMENT (SIGNATURES REQUIRED FOR ACCEPTANCE OF MEMBERSHIP)

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WAIVER & RELEASE: I am fully aware of and appreciate the risks, including the risks of catastrophic injury, paralysis and even death, as well as other damages and losses, associated with participation in a lacrosse event. I agree on behalf of myself, my heirs and personal representatives, that US Lacrosse, the host organization and the sponsor or sponsors with respect to a Covered Event, together with coaches, officials, volunteers, employees, agents, officers and directors of the host organization and any such sponsors shall not be held liable for any injury, loss of life or other loss or damage as a result of my participation in a Covered Event. This Waiver & Release shall also be for the benefit of and run in favor of any youth organization that requires participants to become members of US Lacrosse as a condition to their participation in such organization's youth lacrosse events, which shall constitute Covered Events for purposes of this Waiver & Release, and any such youth lacrosse league shall constitute the host organization for such Covered Events. **MEDICAL ATTENTION:** I hereby give my consent to US Lacrosse and the host organization of any Covered Events to provide, through a medical staff of its choice, customary medical/athletic training attention, transportation and emergency services as warranted in the course of my participation in Covered Events. **READINESS TO COMPETE:** I will only participate in those Covered Events in which I believe I am physically and psychologically prepared to compete. **INFORMATION CERTIFICATION:** I certify that all of the information provided by me in this application, including without limitation my membership category, is true, accurate, and complete and I understand that any untrue, inaccurate or incomplete statement or information will automatically invalidate my membership and all of the benefits of membership in US Lacrosse. **CODE OF CONDUCT:** I agree to all terms on the reverse side of this form (refers to accepted US Lacrosse/Positive Coaching Alliance Code of Conduct).

NAME OF POLICY HOLDER

PRIMARY MEDICAL INSURANCE

SIGNATURE OF PARENT/GUARDIAN *required

POLICY NUMBER

SIGNATURE OF PARTICIPANT

DATE



SEND MEMBERSHIP FORMS TO: US LACROSSE, ATTN: BRIDGE MEMBERSHIPS,
113 WEST UNIVERSITY PKWY, BALTIMORE, MD, 21210-3300

CODE OF CONDUCT

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SIGNATURE OF PARTICIPANT

DATE



**SEND MEMBERSHIP FORMS TO: US LACROSSE, ATTN: BRIDGE MEMBERSHIPS,
113 WEST UNIVERSITY PKWY, BALTIMORE, MD, 21210-3300**