



# Liability Release Form

The undersigned states as follows:

I acknowledge that the game of polocrosse involves inherent risks of personal injury to me personally, my horse and damage to equipment and property. Knowing and understanding this, I still desire to participate in, and attend, the club practices and tournaments.

In consideration for my participation in, and attendance to these events, I hereby, for myself, my heirs, executors and assigns; waive, release, discharge and hold harmless; the American Polocrosse Association and the APA club, it's officers, directors, members and agents, and all other persons or organizations in any way connected with this event including but not limited to the field, their owners and operators, their officers, directors, employees, agents, representatives, heirs, administrators and assigns from any and all rights, claims or liability for damages from any and all claims of any kind or nature, that might arise out of my participation in any way connected with this event, or taking place upon the grounds.

I further acknowledge that this release will extend to any accidents, damages or claims arising out of my participation, caused by my own act or the act of anyone or any animal within my control.

By signing this release and waiver, I am assuming all risks of the activities in which I will be engaged and releasing all of the parties indicated above of any and all liability for their negligence of any description whatsoever. It is my intent to assume all risks and to waive and give up my rights (for myself and my heirs) to sue, and I do so knowingly and voluntarily.

The APA has a Code of Conduct and has adopted a policy in accordance with the local State Laws of any APA sponsored event of zero tolerance for consumption of alcohol or controlled substances by minors. This policy includes all minors, APA members or spectators while under the influence of alcohol or controlled substances during any APA sponsored event. Any adult who is knowingly contributing to the violation of the policy by providing alcohol or controlled substances to minors will be subject to the same punishment set out below:

1. Any infraction of the policy shall be reported by two credible sources to the event's Tournament Committee with an appeal to the APA Grievance Panel. The Grievance Panel is appointed by the President as a standing committee. The Tournament Committee, if it finds the report reliable, will suspend the minor from play at that instant and then report the incident to the APA Grievance Panel in writing.
2. Upon receipt and verification by the APA Grievance Panel, the Panel shall issue a suspension of up to one year of the offending member's membership beginning from the date of the incident. Upon the second violation, the punishment will be suspension of a Junior's APA membership until age 21 and suspension of an adult's membership for life.
3. Appeal may be taken upon receipt in writing of suspension of membership. Any appeal must be made in writing to the APA Administrator within 30 days of notification by the Grievance Panel. The APA Board of Directors must act upon any appeal and notify the member of its action in writing within 30 days after receiving the written appeal. Suspension will remain in effect throughout the appeal process.

**As an APA member, I agree to abide by the By-Laws, the Code of Conduct and all Rules and Regulations of the American Polocrosse Association. I agree to comply with all State laws pertaining to the possession and distribution of alcohol to minors. Further, I acknowledge that it is my responsibility to comply with all APA rules, including those pertaining to equipment and helmets. The safety of the equipment and the animals that I use is my responsibility.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

## PARENT/GUARDIAN RELEASE AND WAIVER OF LIABILITY

I am the parent or guardian of \_\_\_\_\_, A minor, and on the minor's behalf, on my behalf and on the behalf of all other parents or guardians of the minor, I accept the release and waiver of liability above as an inducement for allowing my child to participate in polocrosse games, practices and related activities. I further authorize any emergency medical care which may be necessary.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_