



PO BOX 2814
ISSAQUAH, WA 98027
Info@Issylax.org

Youth Lacrosse Equipment Rental Agreement & Waiver

Player Name: _____

Team: _____

Season: _____

Rental Fee: \$75 for the season (non-refundable)

1. Equipment Provided

The Club agrees to rent the following lacrosse equipment to the above-named player for the duration of the Spring season:

- Helmet
- Shoulder Pads
- Arm Pads
- Gloves
- Stick
- Any additional items listed here: _____

All equipment remains the property of the Club at all times.

2. Term of Rental

The rental period begins on the date equipment is issued and ends on the Club's designated equipment return date, which will be communicated to families at the end of the season.

3. Care and Use of Equipment

- Equipment will be used only by the named player.
- Equipment will be used solely for lacrosse-related activities.
- Equipment will be kept in reasonable condition and not intentionally damaged, altered, or loaned to others.

Normal wear and tear is expected and accepted.

4. Return of Equipment

All rented equipment must be returned in full at the designated collection time and location. If equipment is not returned, or returned with excessive damage beyond normal wear and tear, the Parent/Guardian agrees to pay the full replacement cost of the missing or damaged item(s). Replacement costs will be based on current market pricing.



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5. Assumption of Risk & Liability Waiver

The Parent/Guardian understands that lacrosse is a contact sport and involves inherent risks of injury.

By signing below, the Parent/Guardian voluntarily assumes all risks associated with participation in lacrosse and releases and holds harmless the Club, its coaches, volunteers, officers, and affiliates from any claims, injuries, or damages arising from participation or use of rented equipment, except in cases of gross negligence.

6. Acknowledgment

By signing below, the Parent/Guardian acknowledges they have read, understand, and agree to the terms of this Equipment Rental Agreement & Liability Waiver.

Parent/Guardian Signature: _____

Printed Name: _____

Phone: _____ Email: _____

Date: _____