

**2010 GIRLS LACROSSE CAMP (NORTHSTAR)
JUNE 7TH TO JUNE 10TH AT DUBLIN COFFMAN HIGH SCHOOL**

EVENING SESSIONS FOR GIRLS THE 6TH THRU 12TH GRADES.
5:30PM TO 8:30 PM DAILY. REGISTRATION AT 5PM ON MONDAY

CAMP DIRECTOR: GENA HAN
CO-DIRECTORS : JIM LEAKE AND PAUL CALDWELL

COACH HAN HAS BEEN INVOLVED WITH LACROSSE FOR 10 YEARS AS A COACH AND PLAYER.. COACH LEAKE IS THE ASSISTANT GIRLS COACH AT BISHOP WATTERSON HIGH SCHOOL. HE IS THE FORMER HEAD COACH AT THOMAS WORTHINGTON HS. HE HAS BEEN INVOLVED WITH LACROSSE FOR OVER 30 YEARS. COACH CALDWELL HAS BEEN INVOLVED IN LACROSSE FOR THE PAST 50 YEARS AS A COACH, PLAYER AND OFFICIAL.

PAYMENT : \$110.00 FOR THE EVENING SESSION ; CAMP FEES INCLUDE CAMP T-SHIRT, PIZZA PARTY AND DOOR PRIZE DRAWINGS THE LAST NIGHT OF CAMP. NO REFUNDS.

*USLACROSSE MEMBERSHIP IS MANDATORY;
JOIN ONLINE AT USLACROSSE.ORG*

***** (SCHOLARSHIPS AVAILABLE- CALL 451-9717 FOR INFORMATION) *****

THE CAMP IS STAFFED BY COLLEGE COACHES AND COLUMBUS AREA HIGH SCHOOL COACHES AND PLAYERS FROM OHIO COLLEGES; THEY WILL BE INSTRUCTING AND COACHING THE GIRLS.

BASIC INSTRUCTION WILL FEATURE INDIVIDUAL AND TEAM SKILL IMPROVEMENT BOTH OFFENSIVELY AND DEFENSIVELY. EACH DAY WILL FEATURE GAMES AND TEAM COMPETITIONS.

QUESTIONS: CALL PAUL CALDWELL AT 451-9717

REGISTRATION BEGINS ½ HOUR BEFORE CAMP TIME ON THE 7TH (5PM)

***** NOTE : ALL CAMPERS MUST HAVE A MOUTH PIECE, STICK AND EYE PROTECTION (GOGGLES). YOU CANNOT PLAY WITHOUT ALL SAFETY EQUIPMENT NO JEWELRY (EARRINGS, NECKLACES,ETC) PERMITTED*****

----- RETURN BELOW INFORMATION -----

* MAKE CHECKS PAYABLE TO : NORTHSTAR LACROSSE AMOUNT ENCLOSED \$_____

**** SEND YOUR CHECK TO : 1306 NANTUCKET AVE., COLUMBUS, OH.43235****

NAME : _____ GRADE IN SCHOOL ____ YEARS PLAYED ____

ADDRESS: _____ CITY/ZIP : _____ POSITION _____

HOME PHONE : () _____; EMERGENCY PARENT PHONE : () _____

EMAIL _____

T-SHIRT SIZE (CIRCLE ONE) ADL S ADL M ADL L ADL XL

US LACROSSE MEMBERSHIP # _____ EXP. DATE _____

PARENTS/GUARDIANS ASSUME ALL RISK FOR INJURY OR DAMAGE ASSOCIATED WITH PARTICIPATION. I/WE AGREE THAT THE DUBLIN CITY SCHOOL DISTRICT AND ITS EMPLOYEES ARE NOT RESPONSIBLE AND HOLD THEM HARMLESS; CONSEQUENTLY, I WILL NOT HOLD THESE ENTITIES LIABLE UNDER ANY MANNER OR CIRCUMSTANCE AS A RESULT OF MY CHILD'S PARTICIPATION IN THE PROGRAM.

SIGNED _____ PARENT/GUARDIAN _____ DATE _____

