

2011 Evening Clinic and Summer League Registration

1st boy's name: _____ Age _____ 2nd boy's name: _____ Age _____
 3rd boy's name: _____ Age _____ 4th boy's name: _____ Age _____
 Parent's name (s): _____ Home Phone: _____
 Home address: _____ City: _____ State: _____ Zip: _____
 E-mail address _____ (please print clearly)

Register online with a credit card. Link from www.cvillelax.com

SAVE \$10! Register before May 15, 2011

After May 15

Total fee enclosed:

\$

- | | | |
|---|-------------|-------------|
| <input type="checkbox"/> Evening Clinic Only | \$45 | \$50 |
| <input type="checkbox"/> Seminole League Only | \$60 | \$65 |
| <input type="checkbox"/> Clinic & League Together | \$85 | \$95 |

Please make checks payable to **Seminole Lacrosse**.
 Send check and this form to: Seminole Lacrosse,
 P.O. Box 6374, Charlottesville, VA 22905

- My child (children) has been registered and has paid for the clinic and would now like to register for the summer league.
 I qualify for the family discount of \$5 per child (3 or more SLL participants). #of girls _____ # of boys _____

Every SLL participant must be a member of U.S. Lacrosse—renew annually. Forms are available at www.lacrosse.org

Please send U.S. Lacrosse membership form and check directly to USL in Baltimore.

Existing 2011 member#

New member in 2011. Membership mailed to US Lacrosse on:

1st boy # _____ 2nd boy# _____

1st boy (date) _____ 2nd boy (date) _____

3rd boy # _____ 4th boy# _____

3rd boy (date) _____ 4th boy (date) _____



Clip and save your schedules

Evening Lacrosse Clinic

When: Monday, June 13 through June 16, from 6:30 to 8:00 p.m.

Where: Darden Towe Park.

Who: All boys ages 4 to 13.

What: A lacrosse clinic for boys ranging from beginner to expert. Points of emphasis will be fundamentals, Stick skills, rules, and fun!!

Equip: Just a lacrosse stick (a number of sticks are available for beginners). Please bring a water bottle!

Purpose: The purpose of this clinic is to educate and prepare the boys for participation in the Seminole Lacrosse League. It is very important for beginners to participate in this clinic before participating in The League.

Rain date: If 2 clinic rainouts; we will have a makeup Fri. June 17.

Seminole Lacrosse League

When: First practice is on Monday, June 20. Practices are held from 6:30 to 8:00 p.m. every Monday. *(There will be no practice on Monday, July 4.)* Games are played on **Saturdays from June 25 to July 23.**

Rain date: With 2 Saturday rainouts: makeup Sat. July 30.

AGE GROUPS, GAME TIMES AND EQUIPMENT REQUIREMENTS:

4 to 7: Saturdays at 9:00 a.m. (Lax stick & mouthguard).

8 to 10: Saturdays at 9:00 a.m. (Stick, shoulderpads, armpads, gloves, helmets, and mouthguard).

11 to 13: Saturdays from 10:30 to noon. (Stick, gloves, shoulderpads, armpads, helmets, and mouthguard).

Teams will be formed within age groups each Saturday.

Age groups: 4-5; 6-7; 8-9-10; 11-12-13

- Remember to visit www.cvillelax.com for all your lacrosse information, to register, download forms, or link to US Lacrosse.
- Weather cancellations will be posted on the Web site by 6 p.m. each day of SLL Clinic and League. After 6, call the **Seminole hotline 434.975.0949** for a cancellation message. Please do NOT leave a message.

Seminole Lacrosse Philosophy and Goal

Seminole Lacrosse is an organization dedicated to the promotion and development of the great game of lacrosse in the Charlottesville/Albemarle area. Our goal is to give the youngsters of our area the opportunity to play and experience lacrosse, thus helping the game grow at the middle school and high school levels.

League Directors

Al Sadtler, 434.975.0949 evenings, seminolelacrosse@comcast.net

Rodney Rullman 434.973.2719 evenings • David Thompson 434.245.9609 evenings

Agreement

We, the parents of the above named applicant, hereby apply to Seminole Lacrosse, Inc., a Virginia corporation, for permission for our child to participate in the 2011 Seminole Lacrosse season. As a condition to our child playing in Seminole Lacrosse clinic and league, we agree that, if accepted, our child's participation will be subject to the following representations and rules:

- Included with this application is a non-refundable check.
- We agree that should our child borrow any equipment from a coach, fellow player, a school, Seminole Lacrosse, or anyone else that this will be a mere accommodation resulting from our failure to supply our child's equipment as required and that the party lending such equipment shall not be responsible for its safety or condition.
- By signing this application, we hereby prom-

ise and represent that our child has had a recent physical examination by a licensed physician, that there has been no material change in his/her physical condition since that examination and the he/she has been found, and is currently, medically, and physically fit to play lacrosse.

- We assume all responsibility for our child's transportation to and from practice or games. Seminole Lacrosse will not be responsible for any transportation or any liability or injury arising from transportation supplied by others.
- We acknowledge that lacrosse is a potentially dangerous sport. We and our child agree to assume all risks and hazards incidental to his/her playing the sport. On behalf of our child we hereby release, absolve and agree to indemnify and hold harmless Seminole Lacrosse, its organizers, directors, and offi-

cers, any sponsors, officials, supervisors, the owner(s) of fields or equipment used, other participants, and anyone providing our child with transportation, from any claim or liability including cost of defense, arising out of his/her participation.

- We acknowledge that this form must be signed by both parents. If it is signed by only one parent, we signify that this parent, alone, has the sole legal custody and responsibility for the child.
- We affirm that we have read and fully understand the conditions set forth above.
- We certify that the personal representations made here are accurate, current, and complete to the best of our knowledge.
- I also give permission for the named child (children) to be included in photos or videos for promotional use.

Date: _____ Signature of applicant: _____

Signature of Mother: _____ Signature of Father: _____

Seminole Lacrosse, Inc.
P.O. Box 6374
Charlottesville, VA 22905

Visit www.cvillelax.com all lacrosse information, to register, download additional Seminole Lacrosse registration forms for Boys, Girls, and Players' League, and to link to US Lacrosse for membership forms, which also are available at www.lacrosse.org.

- Visit the Downtown Athletic Store for lacrosse equipment and additional registration forms.
- Visit the **Seminole Oasis** during **Clinic and League** for Seminole Lacrosse shorts, T-shirts, mouthguards, and drinks.