

REGISTRATION

Name: _____
 Address: _____
 Telephone # (____) _____
 Emergency Contact Person _____
 Phone # (____) _____
 Allergies/Daily Medications _____
 DOB: _____ Ht. _____ Wt. _____ Age: _____
 Grade (next Fall): _____ Position _____
 Years Played: _____
 Equipment Needed Yes _____ No _____
 Total (\$100 per girl) \$ _____

Mail this form with full payment by June 30, 2011 to:

Mount Anthony Girls Youth Lacrosse Camp
 4919 Rt. 7A

Shaftsbury, Vermont 05262

Make check payable to:

Mount Anthony Girls Lacrosse

MEDICAL RELEASE INFORMATION

I, the undersigned parent or guardian understand that while participating in the Southern Vermont Youth Lacrosse Camp my son will be engaging in physical activity which contains an inherent risk of physical injury. I hereby waive and release the camp from any and all liability for any physical injuries or illness while at camp. I have no knowledge of any physical impairment that would be affected by the named camper's participation in the Southern Vermont Youth Lacrosse Camp Program. My signature on this waiver also states that the named camper is covered by my personal medical insurance policy. I understand that I am responsible for all hospital, prescription, laboratory and doctor's fees. I give the Southern Vermont Youth Lacrosse Camp Staff authority to act for me according to their judgment in any emergency requiring medical attention for this player.

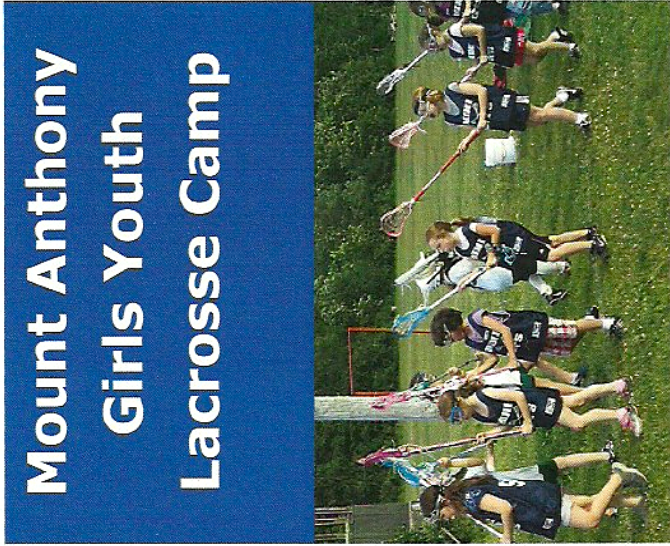
Parent/Guardian Signature _____ Date _____

Participant Primary Medical Insurance Carrier _____

Policy Number _____

**Mount Anthony Girls
 Youth
 Lacrosse Camp**

4919 Rt 7A
 Shaftsbury, Vermont



Ages 6-15

**8:30 am -12:00 pm
 July 11-July 14**

Summer 2011

Overview

The Mount Anthony Girls Youth Lacrosse Camp is designed to teach a beginner the game of lacrosse, and help the experienced lacrosse player to improve her fundamental skills and learn more about the game. We will focus on individual skills and technique and also dedicated time for team play and small sided games. By the end of the week we will put it all together in a full scrimmage. We will organize the camp based on both experience and age level and will work hard to ensure that each camper is having fun, being challenged, and positively motivated on the field. The girls will be broken into three age groups 6-8, 9-11, and 12-15.

Program

The Mount Anthony Girls Youth Lacrosse Camp will be four days, Monday to Thursday with Friday being a rain date. The camp will run for one week from July 11th through July 14th. We will begin every session with a warm-up and stretch followed by working on individual stick skills using various drills and activities. There will be numerous water breaks and one snack break halfway through. After snack we will focus on team play and small team drills. These drills will help the girls put their individual skills together and work as a team. The last day all levels will play a real game amongst themselves.

Contact Information

Macaela Shaughnessy

Phone:

413-652-7268

Email:

mhshaughnessy@gmail.com

Cost

The cost of the camp will be \$100. Registration forms must be received with payments by June 30th. All players must provide their own sticks.

Cleats are recommended but running shoes are acceptable. Each player will be provided with a mouth guard and reversible jersey. All players must provide their own snack and water. The camp will provide water to refill water bottles.

Location

The camp will be held at the Mount Anthony Middle School located on East Road in Bennington.

Staff

The camp will be directed by current Mount Anthony Lacrosse Association's U-15 girls coach Macaela Shaughnessy. Macaela will be assisted by local coaches, MAU varsity players, and alumni.

