



Stanwood Lacrosse

PO Box 863
Stanwood, WA 98292
www.stanwoodlacrosse.com



2014 Stanwood Invitational

Registration

Team representatives should contact Stanwood Lacrosse, stanwoodlax.spartans@gmail.com

Registration and payment should be submitted as soon as possible by mail or online.

Rosters should be submitted by 5/10/14 to be included in the program.

Final rosters should be submitted on 6/1 including player's name, number, grade, and age.

Teams need concussion paperwork on file with their respective programs.

Cost/Requirements – 3 games each team

\$90 K2 teams

\$300 3/4, 5/6, and 7/8 teams

Refunds will not be issued after 5/15.

Each team must supply one high school or adult volunteer to the scoring table for each game.

Each team must have a certified first aid/CPR adult present during games.

Teams must designate a sideline manager for spectators for each game.

Players must be current U.S. Lacrosse members, or otherwise insured on the day of the game.

Rules of the Day

National high school and U.S. Lacrosse youth rules will be in place, with the following modifications:

1. Each game will start on the hour.
2. Games will include two 20 minute running halves, with a five minute half time.
3. Each team will have a 1 minute timeout per half, stopping the clock.
Referees may stop the clock for injuries.
4. No horns for substitutions. All substitutions will be on the fly.
5. Overtime will be one five minute period, sudden victory.
A tie will result if no goal is scored in overtime.
6. The highest emphasis will be placed on sportsmanship.
 - a. 3/4 players will serve penalties in the box but will be replaced on the field.
 - b. Penalty time will begin when play resumes.
7. Offensive and unsportsmanlike behavior will not be tolerated.
Offending players, coaches, or spectators will be subject to removal from the field or premises at the direction of the invitational director or designee. Participants or spectators who refuse to leave will preclude their program's team from continuing to play; no refunds will be issued.





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Invitational Registration

Use this form for one or more teams from the same program

Program name _____

Program representative _____

Contact phone _____

Email _____

Team(s)/age level(s) 3/4 5/6 7/8
(circle one or more)

Head coach _____

Coach's phone _____

Coach's email _____

I have read, and agree to abide by, the Requirements and Rules of the Day. I certify that each player is a U.S. Lacrosse member or will be otherwise insured on the day of the event.

Signature _____

Title _____

Date _____

Please return this form to Stanwood Lacrosse by mail or email (stanwoodlax.spartans@gmail.com) by Thursday 4/24/14.

Please pay a deposit of \$50 per team by check by 5/1/14, or pay the full amount by check or credit card online.

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