



Please return completed registration form and \$300 deposit to:
The Old North State Lacrosse School
PO Box 3663
Cary, NC 27519

Make checks payable to:
The Old North State Lacrosse
School

Balance is due by June 13th, 2010.

Division I Fees

___ Overnight (\$430)
___ Day Camper (\$375)

Division II Fees

___ Overnight (\$390)
___ Day Camper (\$330)

Girls Fees

___ Overnight (\$430)
___ Day Camper (\$375)



PLEASE CHECK (✓) ONE OF THE ABOVE OPTIONS



Last Name: _____

First Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Grade As Of 9/1/2010: _____

Position: _____

Roommate (One Only): _____

Parent Email Address: _____

School Attending in 2010: _____

8th Graders ONLY

High School Attending: _____

I hereby request that my child named above be admitted to the Old North State Lacrosse School and authorize the directors to act for me according to their best judgment in any emergency requiring medical attention.

Parents Signature: _____

Home Phone: _____

Cell Phone: _____

Office Phone: _____

Insurance Company: _____

Policy #: _____

For further information call or write:

The Old North State Lacrosse School
PO Box 3663
Cary, NC 27519

Phone

(919) 363-9367 • (919) 858-9344

(336) 454-2904

<http://www.nclax.com/oldnorthstate>

or

oldnorthstatelacrosse.com