

Little Perfect Connections Lacrosse camp

For girls entering 1st - 3rd grade

June 26th- June 29th
Moorestown High School
Bridgeboro Fields
9:00 a.m. to 12:00 a.m.

Directed by:
Deanna Knobloch:
Moorestown HS Lax Coach
&
Julie Catrambone:
West Deptford HS Lax Coach

COST: \$195
Per Player
Sibling Discount:
\$25 per add'l child



For more
information and
to REGISTER:
www.sjselectlax.com

EQUIPMENT: All campers must have their own stick, mouth-guard, goggles, water bottle, snack and proper footwear.



Application

Name _____
Address _____
City _____ State _____
Zip _____
Telephone _____
School attending: _____
Birth Date _____
Grade in September 2017 _____

Parent's Names _____
Work Phone _____
Cell Phone _____
E-mail address _____
Emergency Contact:
Name _____
Tel. # _____

Please return application and checks for \$195
(Sibling Discount: \$25 per additional child)
Made payable to **SOUTH JERSEY SELECT LACROSSE**
Mail to:
Little Perfect Connections Lacrosse Camp
C/O Deanna Knobloch
908 Mansfield Drive
Moorestown, NJ 08057

Questions? Email Deanna Knobloch at
mhslax01@aol.com
Campers will not be notified of their acceptance
into the camp. Please just plan to show up at
8:30am on the 26th for registration!

APPLICATION DEADLINE - JUNE 20, 2017

AMATEUR ATHLETIC MINOR WAIVER AND RELEASE OF LIABILITY

THE UNDERSIGNED:

1. Agree that the parent(s) or legal guardians(s) will instruct the minor participant that she should inspect the facilities and equipment to be used, and if she believes anything to be unsafe, she should report it immediately to the supervisor or refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inaction or negligence but the action, inaction or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseen at this time.
3. Assume all the foregoing risk and accept personal responsibility for the damages following such injury, permanent disability and death.
4. Release, waive, discharge, and covenant not sue South Jersey Select Lacrosse, its administrators, coaches and other employees of the organization, other participants, sponsoring agencies from any and all liability to each of the undersigned, her heirs and the next of kin for any and all claims, demands, losses, or damages on account of injury, including death or damage to property to be caused in whole or in part by the negligence of the releasees, or otherwise.

I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I/WE GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

Signed Parent or Guardian

Date

Printed Name of Parent or Guardian

Primary Insurance Company

Printed Name of Participant

Policy Number