

FIERCE NATION LACROSSE OUR 17th YEAR OFFERING GREAT LACROSSE



DEVELOPMENTAL PICK-UP LACROSSE GAMES
(COLLEGE PLAYERS & HIGH SCHOOL COACHES WILL PLAY AND INSTRUCT
DURING PLAY)

Pre-Register online at:
<https://atl.sportssignup.com/>



**FOR MORE INFORMATION
VISIT:**
www.alexandriatravellacrosse.com
OR CONTACT:
Coach Dale Nalls
703.203.7357 or
d.nalls@verizon.net

NOW OFFERING 4 LOCATIONS!!!

Walt Whitman Middle School – 2500 Parkers Lane Alexandria, VA 22306

(Within 2 miles of the GW Parkway)

SUMMER: EVERY SUNDAY EVENING (8 WEEKS)

JUNE 15TH - AUG 3RD

Old Guns = Rising 10th-12th Graders (6:30-8pm)

Young Guns = Rising 7th-9th Graders (6:30-8pm)

Wakefield High School – 4901 S Chesterfield Rd. Arlington, VA 22206

(Within 2 miles of 395)

SUMMER: EVERY MONDAY EVENING (7 WEEKS)

JUNE 16TH – JULY 28TH

Old Guns = Rising 9th-12th Graders (6:30-8pm)

Nokesville Park – 12560 Aden Road Nokesville, VA 20181

(Within 5.5 miles of the 234 Bypass)

SUMMER: EVERY MONDAY EVENING (8 WEEKS)

JUNE 16TH - AUG 4TH

Old Guns = Rising 10th-12th Graders (6:30-8pm)

Young Guns = Rising 7th-9th Graders (6:30-8pm)

South County Middle School - 8700 Laurel Crest Drive Lorton, VA 22079

(Within 2 miles of 95)

SUMMER: EVERY THURSDAY EVENING (7 WEEKS)

JUNE 19TH – JULY 31ST

Old Guns = Rising 10th-12th Graders (6:30-8pm)

Young Guns = Rising 7th-9th Graders (6:30-8pm)

Younger Guns = Rising 4th-6th Graders (6:30-8pm)

ADVANTAGES

- Affordable - \$70 - 80 fee covers all summer league costs!!!
- Great Competition in a Fun & Relaxed atmosphere
- Quality Playing Time
- Players will be well supervised and coached

IMPORTANT PLAYER INFORMATION

- Player must provide own equipment (limited supply of equipment will be available for issue & immediate return)
- Players fee covers participation in the weekly game and a t-shirt
- Pre-register online now, or return completed registration by **June 6th** to Dale Nalls, 8575 Cobb Road, Manassas, VA 20112...late registrations will be accepted add \$10.
- Make checks payable to Alexandria Lacrosse Summer League

REGISTRATION

Locations: Whitman MS (\$80): _____ Whitman MS (Summer/Fall Combined) (\$110): _____
Nokesville Park (\$80): _____ South County MS (\$70): _____ Wakefield HS (\$70): _____
Late Fee (add \$10): _____

Name: _____ Telephone: () _____

Address: _____ City/State: _____ Zip: _____

Position: _____ School: _____ Fall 2014 Grade: _____

E-Mail (Parent): _____ E-Mail (Player): _____

Date of Birth: _____ T-Shirt Size: _____

Parental Statement

I hereby verify that my child is physically fit to play the contact sport of lacrosse. In addition, I authorize any emergency treatment deemed necessary for my child to be administered by the medical personnel and agree not to hold the league staff liable for any injuries.

Parent Signature: _____ Date: _____

Medical Consent

If an emergency arises, please list someone who can be notified:

Name: _____ Relationship: _____

Phone: Home: _____ Business: _____ Cell: _____

1. Does applicant have any known allergies? Yes No Type: _____

2. Does applicant have any ongoing disease, physical disability or recurring illness that may affect or impair participation? Yes No (If yes, please attach a physician's note describing the disability and specific limitation for participation)

3. Does the applicant have medical insurance? Yes No

Name of Company: _____ Policy #: _____