

River Line Lacrosse Camp  
12 Eustace Terrace  
Marlton, NJ 08053

# River Line Lacrosse Camp

**FOR GIRLS  
ENTERING  
GRADES 4-12**



**JULY 9-12  
9:00AM—12:00 PM  
Delran Middle School  
Delran, NJ**

## APPLICATION

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_

Parent Name \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact:

Name \_\_\_\_\_

Phone \_\_\_\_\_

School attending \_\_\_\_\_

Grade in 9/18 \_\_\_\_\_

Level Played:

Beginner \_\_\_\_\_

Middle School \_\_\_\_\_

Freshman \_\_\_\_\_

JV \_\_\_\_\_

Varsity \_\_\_\_\_

Position \_\_\_\_\_

**Please make check payable to:  
River Line Lacrosse Camp**

Questions? Email Mike Jackson at  
delranglax@gmail.com

## CAMP INFORMATION

**Location:** Delran Middle School  
905 S. Chester Avenue

**Date:** July 9-12

**Time:** 9:00-12:00

**Cost:** \$120 - *Pay before June 8th and save \$10.* Your cancelled check is your receipt.  
(Sibling discount : \$15 per each addt'l child)

**Check made payable to:**  
**River Line Lacrosse Camp**

**Ages:** Campers will be girls going into grades 4-12

**Equipment Required:** Each player should have a stick, goggles, mouth guard, water cooler and proper footwear.

### Camp Overview

This camp is designed to push your daughter at her own pace. Our enthusiastic coaches will enhance your daughter's love of the game. We want your daughter to have fun AND become the best player they can be!

#### Grades 9-12

Focus on fundamentals and team play. Shooting, team offense and team defense will be stressed. Campers leave camp a more confident player!

#### Grades 4-8

Basic skills and strategies will be introduced and developed with an emphasis on offensive and defensive techniques. Fun drills and games will be a part of each camp day.

## Camp Features

- **Camp shirt**
- **Individual skill development**
- **Team skill development**
- **Theme days**
- **Daily giveaways**
- **Fun for all!**

## Camp Staff

### **Director—Mike Jackson**

- Head Coach, Delran High School
- South Jersey Select coach and recruiting assistant

### **Lyndsay Pasi**

- Assistant Varsity coach
- Former Moorestown Player
- South Jersey Select coach

### **Colleen Hancox**

- Assistant Varsity coach
- Former coach—Scottish Nat'l Team
- William & Mary Alumni
- Former NJ Attacker of the Year

### **Various Delran players**

### **Special Guest Clinicians**

## **AMATEUR ATHLETIC MINOR WAIVER AND RELEASE OF LIABILITY**

**\*\*\*MUST BE FILLED OUT\*\*\***

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 River Line Lacrosse Camp, 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 releases, 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

\_\_\_\_\_  
Printed Name of Participant

\_\_\_\_\_  
Primary Insurance Company

\_\_\_\_\_  
Policy Number