

# 2014 GIRLS LACROSSE SUMMER CAMP

9:00-12:00

The Camp will feature individualized instruction in the fundamentals of lacrosse. Daily games will use the basic skills in actual situations and include learning the rules of the game. Ability grouping will allow campers to learn and play with others of the same ability in non-pressured situations. Participants will have fun while learning to play.

Location: Brien McMahon High School  
Fee: \$110.00  
Time: 9:00 a.m. – 12:00 pm    Ages 8+

Session                  Dates  
3                                  July 14 – July 18

*\*Bring your lax stick and mouth guard*

**\*IN CASE OF BAD WEATHER INDOOR FACILITIES @ BRIEN MCMAHON WILL BE AVAILABLE\***

## 2014 GIRLS LACROSSE CAMP REGISTRATION/PERMISSION FORM

### Camper Information

Name \_\_\_\_\_  
(Last)                                  (First)  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Home Phone \_\_\_\_\_ Age \_\_\_\_\_  
Grade Entering in Fall 2014 \_\_\_\_\_ School (Fall 2014) \_\_\_\_\_

### PERMISSION

#### (Must accompany registration)

My child has my permission to participate in the Summer Program sponsored by the Athletic Department of the Norwalk Public Schools. I understand that any medical costs incurred due to injuries suffered by my child while participating in the camp will be assumed by me, the undersigned parent/guardian, and that neither the camp directors nor the Board of Education will be held liable.

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

### Parent/Guardian Information

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
e-mail \_\_\_\_\_

Session	Dates	Fee
3	7/14-7/18	\$ 110.00



### Emergency Contact (other than Parent/Guardian)

Name \_\_\_\_\_ Relationship to camper \_\_\_\_\_  
Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_  
Name \_\_\_\_\_ Relationship to camper \_\_\_\_\_  
Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

### Payment Info *(Check amount can't be combined with other NPS Camps)*

Check / Money Order # \_\_\_\_\_ Amount \$ \_\_\_\_\_

Total Cash enclosed \$ \_\_\_\_\_

Name of person paying \_\_\_\_\_

Make checks payable to the NPS Athletic Department. Your cancelled check is your confirmation and receipt. Please do add other camp amounts onto check for baseball/pm sports. You can combine campers for baseball/ and/or pm sports.

**Any check returned for insufficient funds or a stop payment order will be charged an additional \$30.00.** Refunds for cancellations are subject to a \$20 service fee (except with a written medical notice from a doctor).

We reserve the right to withdraw any camp with insufficient enrollment.

*For further information, please call the Administrator of Summer Sports Camps, Joe Madaffari, 203-852-9488 ext. 11246.*

**Mail registration with full payment and signed permission slip to:**

Brien McMahon High School, Attn: Lorna Young, Athletic Department  
300 Highland Avenue, Norwalk, CT 06854

[http://www.schoolrack.com/NPS\\_Summer\\_Camps/](http://www.schoolrack.com/NPS_Summer_Camps/)