

**SUMMER 2016**  
**SOUTHERN YORK SUMMER LEAGUE**



**SYSL**

**soyolacrosse.com**

**QUALITY INSTRUCTION WITH LOTS OF LAX'N**  
**10 GAME SEASON, MAY 31 - JUNE 30.**

**\$100** IN ADVANCE  
**\$115** AFTER 5/11

**BOYS LAX LEAGUE- AGES 7-15**

**Division I : Mondays & Wednesdays 5:30-7:45pm > boys Ages 11-15**

**Division II : Tuesdays & Thursdays 5:30-7:45pm > boys Ages 7-10**

# SOUTHERN YORK SUMMER LEAGUE

SYSL \*\*\* Boy's Lacrosse \*\*\* 2016

All games will be played at Susquehannock High turf or at Miller Park (behind the YMCA in New Freedom, PA)

## INSTRUCTIONAL AND GAME PLAY FORMAT:

Instead of set teams, we provide instructional time first and then we make two even teams with the players who are present. This format has been very well received and the players really show improvement throughout the season. Players gain a season of experience in only 5 weeks!

### What it will look like:

5:30 – 6:20 pm - instructional time and drills. Individual skills as well as team concepts will be presented.

6:30 – 7:45 pm - make teams and play a game. Two 30 minute running half's, players have the opportunity to apply what they just learned and receive immediate feedback! Teams are different each time. Parents are welcome & encouraged to hang around to enjoy the games each evening.

## GENERAL INFORMATION:

- \* All games will be officiated.
- \* In SYSL, we match ability levels and stress fundamentals, stick work and concepts, not slashing / hitting!
- \* Players can experiment with new positions if desired or continue to develop at their favorite position.
- \* No equipment will be supplied. Mouth pieces, shoulder and elbow pads are required for games.
- \* The number of participants will be limited to ensure participation for everyone.
- \* All players will receive a reversible SYSL jersey and must bring it to each session.

## WHO:

\*Division I: For players who just completed the U-13, U-15 or JV seasons (9<sup>th</sup> grade). Ages 11-15.

\*Division II: For players who just completed the U-9 or U-11 seasons. Ages 7-10.

Boy's that are 10 or 11 may play up or down depending on ability or experience. Feel free to contact me if you would like to discuss this.

## WHEN:

\* Division I will play on Mondays & Wednesdays, the START date is Wed 6/1, the last date is Thur 6/30 (only Thursday night scheduled).

\* Division II will play on Tuesdays & Thursdays, the START date is Tue 5/31, the last date is Thur 6/30.

\* Both divisions are scheduled for 10 evenings. Due to the calendar this year, Memorial Day/July 4th, Div I will play their final game on 6/30.

## Rain dates:

An email will be sent out to indicate that games are cancelled by 4:45 pm at the latest. If the weather changes suddenly you can call the SYSL hotline: 717-654-4569. If needed, the schedule may be adjusted to try to make up game play for both divisions.

## REGISTRATION:

\* Complete the application (below), and mail it in along with the donation. Mail to: SYSL PO Box 176 New Freedom, PA 17349

\* Donation of \$100 (\$115, after May11 ) checks made **payable to SYSL**. NO REFUND POLICY

\* **Questions can be directed to: [leblanclax@gmail.com](mailto:leblanclax@gmail.com)**

\* The league will be filled in the order that registrations and donations are received. SPACE IS LIMITED to ensure adequate playing time.

**Russ LeBlanc - Director of SYSL**

*Most wins in the history of York County high school lacrosse -Recognized as Coach of the Year multiple times in Balt. Co, York Co, & Central Pa*

## REGISTRATION AND MEDICAL FORM

Name: \_\_\_\_\_ Age: \_\_\_\_\_ DIVISION: \_\_\_\_\_ I (11-14) or \_\_\_\_\_ II (7-10)

Address: \_\_\_\_\_ Your Spring Team: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

Grade you just completed: \_\_\_\_\_ Position (circle one or # preferences) G \_\_\_\_\_ D \_\_\_\_\_ M \_\_\_\_\_ A \_\_\_\_\_

PRINT Email addresses: \_\_\_\_\_, \_\_\_\_\_

## SOUTHERN YORK SUMMER LEAGUE EMERGENCY AGREEMENT

Parents are asked to complete the emergency information form. In case of an emergency, an attempt will be made to contact who ever is listed below. If the injury is serious and parents cannot be reached, EMS will be notified. Lacrosse is a contact sport and injury is possible.

\* Best phone numbers to reach Father: \_\_\_\_\_ Mother: \_\_\_\_\_

\* If parents cannot be notified, please contact:

Notify: \_\_\_\_\_ Phone: \_\_\_\_\_ or \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Doctor's phone number: \_\_\_\_\_

List any medications presently being taken: \_\_\_\_\_

List any known allergies: \_\_\_\_\_

List any relevant sports injuries: \_\_\_\_\_

US Lacrosse Membership #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

I give my consent for volunteers and employees of SYSL to use their own judgment in securing medical and ambulance service in the case of an emergency if the parents cannot be notified. In the case of an emergency, I hereby give my permission for a program representative to call 911 and have my son/ward transported to a hospital. I agree not to hold the Southern York Summer League, volunteers, or employees responsible for any injury received while playing in this league. I further agree that my son/ward has been examined by a doctor and is fit to play lacrosse. I understand that my son/ward is not covered by team insurance and must provide the equipment necessary to prevent serious injury.

**Mail to: SYSL**

SIGNED \_\_\_\_\_ DATE: \_\_\_\_\_

P.O. BOX 176 New Freedom, PA 17349