



MONTCLAIR BOYS JUNIOR LACROSSE

CHARTER MEMBER OF THE NEW JERSEY JUNIOR LACROSSE LEAGUE, A SUB-DIVISION OF U.S. LACROSSE, THE NATIONAL GOVERNING BODY FOR THE SPORT OF LACROSSE

Our Program is Open to all Montclair Resident Boys in Grades K-8

WINTER 2018 SKILLS & DRILLS PROGRAM PLAYER REGISTRATION FORM

STEP 1: Go to: www.montclairlacrosse.com for basic program information and to register. You can complete the **Online Registration Process** regardless of payment option (credit card, check and money order). If paying by check or money order, please also fill out the Registration Form and mail to our Registrar at the address below. If you have registered and paid online, there's no need to complete this form.

STEP 2: Players must be registered/members of **U.S. Lacrosse**. The annual membership is required for new/returning players. Our **Online Registration Process** will take you through the steps to become a member. If paying by check or money order, please contact Jessica Freeman at MontclairLaxRegistrar@gmail.com. The **U.S. Lacrosse** registration web address is: [USL Youth Registration Page](#)

US Lacrosse Membership Number: _____

Player's Name: _____

School Name: _____

Home Address: _____

School Grade: _____

Parent/Guardian Phone: _____

Birth date (MM/DD/YEAR): _____

Parent/Guardian's name(s): _____

Parent/Guardian E-mail: _____

Emergency contact (mobile): _____

Parent/Guardian has interest in volunteering to help with:

Team Manager Duties _____
Parental Assistant Coaching _____
Game Day Volunteer _____

I, THE PARENTAL /LEGAL GUARDIAN OF THE ABOVE NAMED PLAYER, HEREBY GIVE MY PERMISSION FOR MY CHILD TO PARTICIPATE IN ANY AND ALL ACTIVITIES THROUGHOUT THE 2016 MONTCLAIR BOYS JUNIOR LACROSSE SEASON. I ASSUME ALL RISKS AND HAZARDS INCIDENTAL TO SUCH PARTICIPATION INCLUDING TRANSPORTATION TO AND FROM ALL ACTIVITIES. I ALSO AGREE TO WAIVE, RELEASE, ABSOLVE, INDEMNIFY, AND HOLD HARMLESS THE LACROSSE CLUB OF MONTCLAIR, ITS ORGANIZERS, SUPERVISORS, COACHES, PARTICIPANTS AND PERSONS TRANSPORTING MY CHILD TO AND/OR FROM MONTCLAIR EVENTS FROM ANY CLAIM OR ACTION ARISING FROM ANY INJURY TO MY CHILD. FINALLY, I AGREE TO ABIDE BY THE MONTCLAIR PARENT'S CODE OF CONDUCT & TEAM RULES AT ALL MONTCLAIR SPONSORED EVENTS AND WILL ACCEPT DISCIPLINARY ACTION TAKEN AGAINST ME AND/OR MY CHILD FOR DUE CAUSE.

Parent or Legal Guardian's Signature: _____ Date: _____

STEP 3: Provide check or money order payable to The Lacrosse Club of Montclair

1th – 4th grade (Sundays 12-1:30PM) \$190.00/player

5th – 8th grade (Sundays 1:30- 3PM) \$190.00/player

Sundays 1/7, 1/21, 1/28, 2/4, 2/11, 2/18, 2/25, 3/4 Montclair Soccer Dome "Bubble"

Please remit check or money order along with this completed registration form to:
The Lacrosse Club of Montclair
c/o Jessica Freeman
20 Van Vleck St
Montclair, NJ 07042

For Registration questions, please contact:
Jessica Freeman at
MontclairLaxRegistrar@gmail.com

For Program questions, please contact:
Paul Marchand at PaulMarchandGrandview@gmail.com

Registration is open 11/2/17 and closes 1/6/18. No refunds after 1/14/18.

REGISTRAR'S USE ONLY:

DATE: _____ CHECK #: _____ CASH: _____ OTHER: _____