



LAKEWOOD RANCH HIGH SCHOOL LACROSSE CAMP



Interested in getting involved in boys or girls' lacrosse? Join us at the Lakewood Ranch High lacrosse summer camp! During camp, you will be coached by the varsity coaches and the players. We will cover the fundamentals of catching, throwing, and learning how the game works. All levels of experience are welcome, and equipment is not necessary!

Who: Boys and girls who are entering 1st grade – entering 9th grade

When: June 3-6 2019, 9 AM to 12 PM

Where: Lakewood Ranch Park soccer fields (located behind LRHS)

How much: Camper fee is \$125.

What to bring: A stick (if you have one), water, a snack, and sunscreen

Please complete the following information and return to the LRHS front office, labeled Attention: Coach Stoltz.

****Checks should be made out to Lakewood Ranch High School, with lacrosse on the memo line****

Camper Name: _____ Age: _____ Height: _____ Weight: _____ Sex: _____

Grade entering in fall of 2019: _____ T-shirt size: _____

Emergency Contact (Name/Contact Number): _____

My son / daughter has my permission to attend Lakewood Ranch High School Lacrosse Clinic. I have no knowledge of any physical impairment that would affect or be affected by my child's participation in the LRHS Lacrosse Clinic. In the event of the need for medical treatment, I give the clinic staff permission to act for me to obtain for my child whatever medical treatment the staff in its best judgment deems necessary and appropriate. I specifically consent to such treatment including but not limited to hospitalization and surgery. I acknowledge that at the Lacrosse Clinic my child will participate in a sport that will involve, among other things, physical contact of the body with other persons or objects, including the ground that at the Lacrosse Clinic could result in physical injury. I specifically waive and release and hold harmless the LRHS Lacrosse Clinic Staff members, the School Board of Manatee County and its employees from liability for any claim for damages which I or my child may have injuries or illness that they may sustain at the Lacrosse Clinic. I authorize the LRHS Lacrosse Clinic to use my child's name, and or photographs of my child for articles for publicity purposes.

Parent/Guardian Signature: _____

Questions? Contact Coach Stoltz at stoltz2s@manateeschools.net