

COMPOUND LAX

Youth Lacrosse Camp

Registration Form

June 13th – July 27th

(7 Week Camp)

Camp Fee: \$125.00

Equipment Rental Fee (if applicable): \$40.00

NOTE*: A guardian must be present

Camp Choice (please circle): “Beginners” (Gr 1-4) “Advanced” (Gr 5-8)

Fee Included: \$ _____ Equipment Rental Fee Included: \$ _____

Players Name: _____ Age: _____

School: _____

Parents Name: _____ E-mail: _____

Address: _____ City/Zip: _____

Cell #: _____ Second Number: _____

Please Make Checks Payable to: Terry Nichter

Mail to: 4572 Hoagland Road/ Fort Wayne/ IN / 46816

Payment due at time of registration

Medical Release Agreement and Parental Consent

Students are expected to carry their own accident and/or medical insurance. Coaches and Instructors of Compound Lax Youth Lacrosse Camp are safety conscious and follow appropriate safety procedures. I understand that lacrosse is a contact sport in which injury may occur and I assume all risks and hazards incidental to their participation in the program. I further release Compound Lax Youth Lacrosse Camp, its staff, affiliates, and the host facilities from liability associated with my child participating in the program.

Name of Player: _____

Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____ Date: _____