HORSEHEADS VARSITY "H" GIRLS LACROSSE SUMMER CAMP



To Register:

Complete the registration form below.

Read the AUTHORIZATION FORM on the reverse side and sign it in the designated area, detach and MAIL ONLY THE REGISTRATION FORM to:

HORSEHEADS CENTRAL SCHOOL ATHLETIC DEPARTMENT ONE RAIDER LANE HORSEHEADS. NY 14845

PLEASE BRING PAYMENT TO FIRST DAY OF CAMP

\$85.00 MAKE CHECKS PAYABLE TO: HORSEHEADS VARSITY "H" CLUB

NAME	
ADDRESS	
CITY	
STATE	ZIP
PHONE	
AGE	
SCHOOL	
GRADE FALL 2019_	

SHIRT SIZE: YS YM YL (circle one) AS AM AL AXL

HORSEHEADS ATHLETIC OFFICE ONE RAIDER LANE HORSEHEADS, NY 14845 607-739-5601



HORSEHEADS VARSITY "H" GIRLS LACROSSE CAMP



July 15^h-17th 9:00-12:00

SPONSORED BY:

HHS VARSITY "H"

Horseheads Central School Athletic Office One Raider Lane Horseheads, NY 14845

GENERAL INFORMATION

WHEN: July 15-17

TIME: 9:00-12:00

WHERE: ALL CAMPERS will meet at the Pavilion behind the HIGH SCHOOL on Day 1. The camp will run on the Lacrosse Fields behind Horseheads High School.

EQUIPMENT REQUIRED: Workout gear, cleats or sneakers, lacrosse stick, mouthpiece, goggles or helmet, snack and drink.

AGE GROUP: Camp is open to any girl in public or private school in grades 1-10.

REGISTRATION FEE: \$85.00 This includes a camp T-shirt

OF CAMP PAYABLE to:

Horseheads Varsity "H"

You may register at the Athletic Office located at the High School, or mail it in.

INFORMATION: For more information please contact the Athletic Office at 739-5601 ext. 4254.

CAMP PHILOSOPHY

This camp will help further develop each individual's skills in lacrosse. Each day, the athletes will learn the basic fundamentals through instruction, skills and drills, and various games and competitions. This camp will give each player the necessary background of the game, and give them the proper instruction to be an excellent player at any level.

Camp Directors:

Kelly Reilly: Head Girls Varsity Coach at Horseheads

Jennifer Woodworth: Assistant Girls Varsity Lacrosse Coach at Horseheads

Jennifer Guzylak: Head Girls JV Lacrosse Coach at Horseheads

Sarah Cerroni: Head Girls Modified Lacrosse Coach at Horseheads

Camp Assistants:

Horseheads varsity lacrosse players will be the counselors at camp.

AUTHORIZATION

110 1110 11111111	
WE THE UNDERSIGNED PARENT OR	
GUARDIANS OF A MINOR, DO	
HEREBY AUTHORIZE THE DIRECTORS OF	
THE HORSEHEADS VARSITY H SUMMER	
SPORTS CAMP PROGRAM, OR THEIR	
DESIGNEE, TO SELECT HOSPITAL	
FACILITIES AND/OR A PHYSICIAN OF	
THEIR CHOICE AND AUTHORIZE	
TREATMENT OF THE ABOVE NAMED	
CAMPER ON AN EMERGENCY BASIS IN	
THE EVENT THAT TREATMENT BECOMES	
NECESSARY DURING THIS SPORTS CAMP.	
WE HEREBY GRANT PERMISSION TO	
PARTICIPATE IN THE CAMP PROGRAM	
ANDACKNOWLEDGE THAT THE CAMPER	
NAMED IS PHYSICALLY FIT TO	
PARTICIPATE IN ALL CAMP ACTIVITIES.	
THE ATHLETE WILL OBEY ALL SCHOOL	
DISTRICT RULES AND REGULATIONS OR	
BE SUBJECT TO DISMISAL FROM THE	
PROGRAM AND BE SENT HOME	
IMMEDIATELY. THE SIGNATURE OF THE	
PARENT OR GUARDIAN ACKNOWLEDGES	
THEIR WILLINGNESS TO ENROLL THE	
CHILD IN THE HORSEHEADS VARSITY H	
SUMMER SPORTS CAMP PROGRAM UNDER THE CIRCUMSTANCES STATED	
ABOVE. THE SIGNATURE OF THE	
PARENT OR GUARDIAN RELIEVES THE	
HORSEHEADS VARSITY H CLUB, THE	
HORSEHEADS CENTRAL SCHOOL	
DISTRICT, AND THEIR DELEGATED	
REPRESENTATIVES FROM ANY AND ALL	
FINANCIAL RESPONSIBILITY.	
Parent/Guardian:	
1 archit/ Quardiani.	
Please print	
SIGNATURE(PARENT)	
HOMEWORK	
PHYSICIAN	

DATE SIGNED