

Youth Girls Summer Lacrosse League

Location: Pittsford Sutherland High School

Date: June 27th – August 3rd

(No games or practice the week of July 4th)

Days: Tuesday - 1st-4th grade

Thursday – 5-6th grade

(As of September, 2006)

Time: 5:00 – 6:00 pm (practice)

6:00 – 7:00 pm (game play)

Cost: \$50 per player (check payable: Lady Panthers Inc.)

Equipment required: Stick, mouth guard, and goggles

REGISTRATION FORM

Name: _____ Grade: _____

Address: _____ Phone # _____

School: _____ Email Address: _____

MEDICAL INSURANCE

It is understood that the Lady Panthers Inc. is not responsible for accidents resulting in medical, dental, or other expenses including loss of personal items. A non-refundable fee of \$50.00 is required by 3rd. As legal guardian of the participant below, I grant permission to provide emergency treatment if necessary. The participants below and her family, assume the risk of injury while participating, therefore, release Lady Panthers Inc., coaching staff, league director, and the Pittsford Central School District from liability.

Parent/Guardian Signature: _____ Date: _____

Insurance Provider: _____ Policy Number: _____

US Lacrosse Number: _____ (all players must be US Lacrosse Members)

Make checks payable to Lady Panthers Inc. and mail it to:
1865 Gloria Drive, Fairport, NY 14450