

# Clearwater Youth Lacrosse

## Winter League 2011

Clearwater Lacrosse is introducing a new Sunday afternoon Winter League/Clinic series that will begin November 6th, and run until December 11th. The winter series will be sessions 2-3 hours in length that will include short field games and skills sessions so that the player will be able to work on fundamental skills during half the clinic, and be able to apply those skills in a short field 3 v 3 or 4 v 4 format for the remainder. This will be an excellent way to prepare for the upcoming spring season by working on fundamentals, building stamina, and getting the player a chance to fine tune his skills. As an added bonus there will be an occasional guest coach or player from the college and pro ranks, to help with these sessions.

### Registration Form:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Position: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Current or last team you played for: \_\_\_\_\_

I am signing up as an: \_\_\_\_\_ Individual \_\_\_\_\_ As a team. The team I will be playing on \_\_\_\_\_ Team.  
(Max number of players per team will be 5)

If you are a US Lacrosse Member, Please provide us with your #: \_\_\_\_\_

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#### Leagues:

\_\_\_\_\_ HS Boy's Varsity

\_\_\_\_\_ HS Girls

\_\_\_\_\_ MS Boy's League

\_\_\_\_\_ MS Girls

\_\_\_\_\_ Youth Boy's League (5th & 6th Grade)

\_\_\_\_\_ Rec. League (1st through 4th grade)

Yes, I have a Jersey, my number is: \_\_\_\_\_ No, I need a Jersey: \_\_\_\_\_.

**Cost:** All leagues are \$50 if you have a jersey. \$65 if you need a jersey.

**Checks Payable to:** Clearwater Youth Lacrosse in the amount of \$ \_\_\_\_\_

**Send to:** 2663 Megan Ct. Palm Harbor, FL 34684

### **Medical Insurance Information**

**Person to notify in case of Emergency:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Insurance Carrier:** \_\_\_\_\_ **Policy Number:** \_\_\_\_\_

***Waiver Exclusion Clause:** I, the undersigned parent/guardian, in enrolling in this lacrosse league/clinic/tournament, understand that in attending any sport program and using the facilities do so at the participant's own risk. The Shooters Lacrosse, its representatives, Clearwater Youth Lacrosse Inc, the City of Clearwater, the county of Hillsborough, The Tampa Bay Youth Football League, D & E Associates and all agents shall not be held liable for any damages whatsoever arising from any personal injury or property loss sustained by participants or family members on the premises. Participants, parents/guardians assume full responsibilities for all injuries and damages which may occur in or around any program on the premises and hereby fully and forever release, discharge and hold harmless Clearwater Youth Lacrosse and all associated facilities and their owners, agents and employees from any claims, damages, rights of action, present or future, resulting from or arising out of any person's participation in any program or use of its facilities. In addition, participant agrees to follow the rules and conduct set by the Shooters Summer Lacrosse director. Participant, parent/guardian, understands that failure to comply with rules and regulations will result in suspension from participants. I, the undersigned parent/guardian, hereby grant authority to Shooters Lacrosse director, to render a judgment concerning medical assistance or illness during my absence.*

*I further grant the Release Parties the right to photograph and/or videotape me and/or my child or ward and further to display, use and/or otherwise exploit my and/or my child's or ward's name, face, likeness, voice, and appearance forever and throughout the world, in all media, whether now known or hereafter devised, throughout the universe in perpetuity (including, without limitation, in online webcasts, television, publicity, newspapers and magazines) and in all forms including, without limitation, digitizing images, whether for advertising, publicity or promotional purposes, including, without limitation, publication of Event results and standings, without compensation, reservation or limitation. I further authorize distribution by the Release Parties of my contact information, including my email address, to third parties for promotional purposes, or for any other purposes whatsoever, without compensation, reservation or limitation. The released Parties are, however, under no obligation to exercise any rights granted herein.*

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_