



VB LAX Crew Lacrosse Camp

Join us for four days of endless lacrosse fun! **VBLC** is teaming up with the **Bishop Sullivan Varsity Team Alumni** and **and current collegiate players** to take your game to the next level! If you have never played before, our goal is to teach you the basics of a fun, new sport. Each day will consist of drills, skills, scrimmages, and games. We guarantee you will walk away a better player!

Rising 2nd thru 8th grade girls (*Will be grouped according to age and/or ability level*)

August 4th-7th from 12:00 PM -3:00 PM on the turf at Bishop Sullivan Catholic High School

Cost: \$100/camper

What to bring: LAX Stick, mouth guard, goggles, water, a light snack, and **a smile!**

*Field Hockey camp in the AM, \$50 discount if you sign up for both and stay all day! Email for a reg. form!

For more info: vbturfcrew@gmail.com

Player Name:

Check here if you have never played lacrosse before

Grade entering in Fall:

DOB:

Email Address:

Current School:

Parent Name:

Parent Cell:

Medical Concerns:

Make Check Payable to: **VB LAX Crew**

Mail to: **Lyndsey Boyce 2017 Grandon Loop Road VA Beach, VA 23456**

Release of liability: Lacrosse is a sport that often involves forceful contact with the ground, another player, a hard ball, or a stick. Because of these conditions inherent to the sport, participating in Lacrosse exposes an athlete to risks of injury. We have read and understand the above risks concerning playing lacrosse. Also, I understand that it is the duty of each participant to exercise reasonable care for their own safety and that of other participants. Under Virginia law, we agree to hold VB Lax Crew Field Hockey, Bishop Sullivan Catholic High School, and their employees, representatives, coaches, officials, volunteers, and agents harmless in any and all liability actions, claims, or additional legal action in connection with any activities related to participation in the VB LAX Crew Camp. In signing this form, we assume the inherent risks of lacrosse and waive future legal action by our heirs, estate, executor, administrator, assignees, family members, and ourselves. I / we consent for our daughter to receive any and all emergency medical treatment as may be deemed appropriate under the existing circumstances as then determined by coaches, officials, trainers, sponsor or its agents, and emergency medical personnel.

Signature of Parent/ Legal Guardian: _____