

Saucon Valley Lacrosse Spring 2009 Registration

Player's Name: _____ Male _____ Female _____ DOB _____

Team _____

Address: _____

Phone: _____

Email address(es) for team info: (Print Clearly) _____

Emergency Contact: _____

Phone: _____

Mother's Name: _____

Telephone: (H) _____

(C) _____

Father's Name: _____

Telephone: (H) _____

(C) _____

PARENTAL WAIVER AND RELEASE

I, the parent or guardian of the above named child, do hereby give my approval for his/her participation in activities of Saucon Valley Lacrosse and according to advice from our physician, he/she has no physical disability or defect which would preclude him/her from participation in Lacrosse. I (we) assume all risks and hazards incidental to the conduct of the activities of Lacrosse, I (we) acknowledge that Lacrosse is a contact sport, involves body checking and stick checking and my (our) child can be injured in the activities of Lacrosse, I am fully aware of, and appreciate the risks, including the risks of catastrophic injury, paralysis and even death, as well as other damages and losses associated with participation in the activities of Lacrosse. I (we) on behalf of myself, my heirs and personal representatives hereby release, absolve, indemnify and hold harmless Saucon Valley Lacrosse, the Saucon Valley School District and their respective coaches, trainers, volunteers, agents, employees, representatives, officers and directors from any liability whatsoever in connection with any injury, loss of life or other loss or damage I or the player named above may sustain as a result of participation in the activities of Saucon Valley Lacrosse.

Date: _____

Parent/Guardian Signature

Print Name

PARENTAL RESPONSIBILITY

SVL is a non-profit, all-volunteer program. Its success depends on the participation of players' parents. It is mandatory that you choose at least one area listed below.

Coaching _____ Stats, time keeping _____ Equipment Management _____

Team Parent _____ Program _____

Fields/Grounds _____ Golf Tournament _____

Registration Fees:

Player Fee: _____

Mandatory Program Ad** _____\$25.00_____

Late Fee: \$25.00 _____

Total: _____

Make Checks Payable to Saucon Valley Lacrosse

Player Fees:

Elementary Girls \$80.00
(Grade 2 - 6)

Middle School Girls \$125.00
(Grade 7- 8)

Youth Boys (U9) \$80.00

Youth Boys \$125.00
(U11, U13, U15)

**** MANDATORY PROGRAM AD EXPLANATION**

\$25 fee entitles you to put a personalized message in our Program Book to your son or daughter. "Good luck Timmy and Susan Smith, Love Mom & Dad" Maximum space will be approximately the size of a business card.

Your other option is to sell this Program Ad space to someone else to reduce the total cost of registering your son or daughter. If you choose to resell this ad space, please mail the Ad information to the following address by **February 15, 2009**.

Anne Baum
c/o Accomplished Vision
PO Box 1084
Bethlehem, PA 18016

You can email questions to Ann at annebaum@verizon.net

2009 SAUCON VALLEY LACROSSE REGISTRATION INFORMATION

Players and Parents,

Welcome to the Saucon Valley Lacrosse's third season! Our programs continue to grow and change, so please feel free to ask if you have any questions. Please check the Club's website for updated information through-out the year - www.sauconvalleylax.org

Registration Dates: December 6, 2008, 9AM-1PM, SVHS Cafeteria Boys & Girls

Player Fees are as follows:

Youth Girls (Grades 2 - 6)	\$80.00
Middle School Girls (Grade 7- 8)	\$125.00
Youth Boys (U9)	\$80.00
Youth Boys (U11, U13, U15)	\$125.00

Youth boys will be organized into the following divisions:

- U-9 - Children under the age of 9 as of 12/31/2008
- U-11 - Children under the age of 11 as of 12/31/2008
- U-13 - Children under the age of 13 as of 12/31/2008
- U-15 - Children under the age of 15 as of 12/31/2008

Team Pictures: Team pictures will be scheduled for early March 2009
Check the Club's website - www.sauconvalleylax.org - for the exact date and time
Bring check made payable to "Pittman Photography"

Team Picnic: The Lower Saucon Park Pavilion has been reserved for May 23, 2009. Specific times for each team will be announced later in the season.

Registration Coordinators: Carol Schneider ecscheidsv@rcn.com 610-838-1354
Katie Intini kintini@ptd.net 610-838-7307

Equipment - All boys will need a lacrosse helmet, shoulder and arm pads, gloves, cleats, and a stick. Mouth guards and athletic cups are also required. Goalie equipment will be provided for all teams. Schuykill Valley Sports (Phil Snyder, 610-791-5233) at the South Mall in Allentown has a selection of lacrosse equipment.

Scholarships - Saucon Valley Lacrosse believes that no child should be denied participation due to financial circumstances. Depending on the success of our fundraising efforts, we hope to be able to waive fees and/or provide equipment for those who qualify for assistance. All information will be held strictly confidential. Contact Cindy Oatis (610-868-8778) for details.