

▶ THE CAMP

The goal of New Jersey Elite Lacrosse Skills Camp is to teach and improve your son's lacrosse skills—passing, shooting, offense and defense.

▶ THE CAMPERS

Boys entering 6th, 7th or 8th grades in Fall 2008. Each session is limited to 55 boys. All campers **must** be current US Lacrosse members.

▶ THE STAFF

Camp Director is **Matt Kovachik**, Assistant Varsity Lacrosse Coach, The Delbarton School and Head Coach for New Jersey Elite Lacrosse. Also Coaching is **Dave Giarrusso**, Varsity Lacrosse Coach, Seton Hall Prep. Coaching staff will be current New Jersey Elite high school players. The ratio of campers to staff will be 5 to 1. Each session will have a qualified Trainer.

▶ CAMP LOCATION

Camp will be held on the **Watchung Hills High School** turf field located at 108 Sterling Road, Warren, New Jersey.

▶ NEW JERSEY ELITE LACROSSE

Entering it's eleventh season, New Jersey Elite Lacrosse sponsors a High School team that participates in Summer All-Star tournaments. NJ Elite players are current players at northern New Jersey high school lacrosse programs. Many NJ Elite players graduated from these programs and are continuing to play NCAA Division I and III college lacrosse.



▶ TYPICAL CAMP SESSION

5:00-5:30 pm	Stick Skills- Passing and Shooting
5:35-6:00 pm	Individual Skills-Dodging and Movement
6:05-6:30 pm	Offensive Skill of the Day
6:35-7:00 pm	Defensive Skill of the Day
7:05-7:20 pm	Agility Drills
7:25-8:00 pm	Competition

▶ CAMP SESSIONS

Session 1 July 21st thru July 24th
5pm to 8 pm

Session 2 July 28th thru July 31st
5pm to 8 pm

Both Camp sessions at
Watchung Hills High School, Warren, NJ
Each session limited to 55 players.

▶ CAMP COSTS

Cost per session is \$300 per camper. New Jersey Elite will provide coaching staff, trainer and liquids.

▶ CAMPER'S RESPONSIBILITIES

Camper must bring his own equipment to include: lacrosse helmet, mouthpiece, stick, gloves, shoulder and elbow pads. Camper **must** be active member of U.S. Lacrosse.

▶ TO PARTICIPATE

Send completed application and signed liability waiver by May 1st together with check payable to:

New Jersey Elite Lacrosse, LLC
R.S. Cohen
22 Hobart Road
Summit, New Jersey 07901
908 608-9200



▶ REGISTRATION FORM NEW JERSEY ELITE LACROSSE MIDDLE SCHOOL LACROSSE SKILLS CAMP 2008

- Session 1** July 21st thru July 24th
 Session 2 July 28th thru July 31st

Please print clearly

NAME _____

DATE OF BIRTH _____

STREET ADDRESS _____

CITY _____

STATE _____ ZIP _____

PARENT / GUARDIAN _____

ENTERING GRADE (9/08) _____

HOME TELEPHONE _____

CELL PHONE _____

EMAIL ADDRESS _____

PHYSICIAN _____

EMERGENCY CONTACT _____

TELEPHONE _____

MEDICAL CARRIER _____

POLICY # _____

US LACROSSE # _____

PARENT SIGNATURE _____

DATE _____



WAIVER & RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in the New Jersey Elite Lacrosse 2008 Lacrosse Skills Camp program, related events and activities, the undersigned acknowledges, appreciates, represents and agrees that:

1. The Participant named below is in good health and in proper physical condition to participate in the New Jersey Elite Lacrosse 2008 Lacrosse Skills Camp and is unaware of any ailment, restriction or condition that would otherwise hinder or prevent the Participant from participating.
2. The Participant and/or his or her Parent and/or Legal Guardian (hereafter collective referred to as "We") are fully aware of and appreciate the serious risks, including the risks of catastrophic injury, paralysis and even death, as well as other severe social and economic losses, associated with participation in a lacrosse event and related sports conditioning activities. We further acknowledge and appreciate that even with the most advanced protective gear and strict observance of the rules, injuries may still occur. We hereby agree on behalf of ourselves, our heirs, executors, administrators and personal representatives, to **WAIVE, RELEASE, AND FOREVER DISCHARGE** New Jersey Elite Lacrosse, LLC, its officers, officials, directors, employees, agents, staff members, coaches, volunteers, representatives, sponsoring agencies, and other participants from any and all claims or liabilities for death, personal injury or loss or damages of any kind, which arise out of in any way in the Participant's participation of this event.
3. By signing below, we also hereby authorize New Jersey Elite Lacrosse LLC, its agents, employees, staff members, volunteers, directors and officers to take whatever action is necessary, in their best judgment, in case of an accident or health emergency involving the Participant. This consent includes but is not limited to the administration of any necessary athletic training attention, first aid, transportation and appropriate emergency medical attention as may be warranted under the circumstances.

This is to certify that the undersigned parent and/or legal guardian of the below named minor Participant executes the foregoing Waiver & Release of Liability for and on behalf of the minor. I hereby bind myself, the minor and all other assigns to the terms of this Waiver & Release of Liability. I represent that I have legal capacity and authority to act for and on behalf of the minor named herein and that I have read this Waiver and Release of Liability and fully understand its terms, and understand that I have given up substantial rights by signing it and sign it freely and voluntarily without any inducement.

Printed Name of Participant

Date of Birth:

X _____
Parent/Guardian Signature

Date:

X _____
Participant Signature

Date :

US Lacrosse # _____

SIGN UP TODAY!!



BOYS MIDDLE SCHOOL LACROSSE SKILLS CAMP 2008



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July 28th thru July 31st - 5pm to 8 pm

www.njelitelacrosse.com