## 2017 REGISTRATION

Open to  $2^{nd}$  grade thru 8th grade

Sign up Date **Tuesday- January 24<sup>th</sup> 7:00–9:00 Tuesday- February 7<sup>th</sup> 7:00–9:00 Registration Ends March 1<sup>st</sup>** 

> Location: 73 North Leswing Ave Saddle Brook, NJ 07663

REGISTRATION FEE: \$50.00 for the 1st child, \$40.00 for the 2nd and Non Resident \$60.00 MAKE CHECKS PAYABLE TO: "Saddle Brook Girls Lacrosse"

> Mail To: 73 North Leswing Ave Saddle Brook, NJ 07663

VERY IMPORTANT-PRINT CLEARLY

Parent E-Mail: \_\_\_\_\_\_Birth Date: \_\_\_\_\_Birth Date: \_\_\_\_\_

CIRCLE YOUR CHILD'S SIZE (UNIFORM) \*\$100.00 Deposit - Check will not be cashed if uniform is returned\*

Shirt: YXS, YS, YM, YL, YXL, AS, AM, AL, AXL Short: YXS, YS, YM, YL, YXL, AS, AM, AL, AXL

Amount Enclosed: \_\_\_\_\_ Cash \_\_\_\_\_ Check# \_\_\_\_\_

I give permission for my child to be photographed or videotaped during the season. YES  $\Box$  NO  $\Box$ 

INSURANCE

I, Undersigned Parent/ Guardian give my child permission to play in the Saddle Brook Girls Lacrosse Program. The Saddle Brook Recreation Department will assume responsibility only during regular practices and games scheduled by coaches as a secondary insurance carrier after first submitting any claims to you primary health insurance carrier

In addition all players must be registered with USLacrosso.org

US Lacrosse ID # \_\_\_\_\_ Expiration Date \_\_\_/\_\_\_ For additional information please Email Randy Bibber at <u>CACS4647@GMAIL.COM</u>

> Parents MUST read and sign below Parent/Guardian Signature:

> > Date:\_\_\_\_

THIS PROGRAM IS NOT SPONSORED BY THE SADDLE BROOK BOARD OF EDUCATION