

BLACK DIAMOND LACROSSE

2008 FALL LAXX TRAXX SKILLS SESSIONS

What: Fall Outdoor Clinics
Who: Grades 4-12
Dates: October 5, 19, and 26 at Eisenhower Park Field 1
Times: 3:00-5:00 pm
Cost: \$150.00

Coaching Staff:

Danielle Gallagher: Current Head Coach Manhasset HS, 4 Time Team USA World Cup Player, former University of Notre Dame and Colorado College Assistant Coach
Pam Seebald: Current Head Coach Herricks HS, Former Old Dominion University player
Brigid Lynch: Current Assistant Coach Manhasset HS, former player William Smith

What: Specialty Clinics
Who: Grades 4-12
Dates: Monday, October 13 at Eisenhower Park Field 6 M
Times: Grades 9-12 10:00-1:00 pm
Grades 4-8 1:00-3:00 pm
Cost: Grades 9-12 \$90.00
Grades 4-8 \$60.00

Coaching Staff:

Devon Wills: Current TEAM USA NATIONAL TEAM PLAYER, former assistant coach Dartmouth University, 3 Time All American Dartmouth, 4 Time All Ivy Player
Kinsley O'Garrow: Former TEAM USA ELITE TEAM MEMBER, former assistant coach Pepperdine University and Denver University, All American George Mason University
Danielle Gallagher: Four Time USA WORLD CUP TEAM MEMBER, Director Black Diamond Lacrosse, US Lacrosse Coaches Education writer

Directions to Eisenhower Park:

Meadowbrook PKWY South to Exit M3/ Stewart Ave. Make first left onto Stewart Ave and take a right onto Merrick Ave South. Look for Parking lot 1 NOT Parking lot 1A. Look for Softball Field 5. Soccer Field 1 is just behind this field.

2008 FALL LAXX TRAXX

For questions and more information:

CALL: 516-767-7862
E-MAIL: Danielle@bdlax.com

Please make all checks payable to:
Black Diamond Lacrosse

Mail completed form to:
Black Diamond Lacrosse
PO Box 813
Plandome, NY 11030

NAME _____		GRADE _____
ADDRESS _____		
CITY/STATE/ZIP _____		
PHONE _____		
PLAYER'S E-MAIL ADDRESS _____		PARENT'S E-MAIL ADDRESS _____
YEARS PLAYED _____		GRADUATION YEAR _____
EMERGENCY PHONE NUMBER _____		
PARENT'S CELL PHONE NUMBER _____		
CLINIC: <input type="checkbox"/> Fall Outdoor Clinics - Oct 5, 19, 26 - \$150		<input type="checkbox"/> Specialty Clinics - Oct 13 (Grade 9-12) \$90 <input type="checkbox"/> Specialty Clinics - Oct 13 (Grade 4-8) \$60

I give my daughter, _____, permission to participate in the Black Diamond Lacrosse program. In signing this waiver, I release Black Diamond Lacrosse & other involved parties from any claims or responsibility for injuries suffered as a participant with Black Diamond Lax. I knowingly assume all risks associated with participation, even if arising from the negligence of the participants or others, and assume FULL responsibility for my participation. I certify that I am in good physical condition and can participate in this event. I understand that she will be covered by my own family insurance and may be eligible for supplemental insurance with their US Lacrosse membership. I also understand that by participating in this sport that injury and/ or death may occur and do not hold Black Diamond Lacrosse or its staff responsible.

ATHLETE'S SIGNATURE: _____ DATE: _____
PARENT'S SIGNATURE: _____ DATE: _____
HEALTH INSURANCE PROVIDER: _____ POLICY NUMBER: _____
U.S. LACROSSE NUMBER****: _____

****ALL PARTICIPANTS MUST HAVE A CURRENT US LACROSSE NUMBER. DO NOT MAIL THIS APPLICATION WITHOUT US LAX #