

BLACK DIAMOND LACROSSE

VARSIITY WINTER LEAGUE 2011-2012

Varsity League - Sundays 8:00am-3:00pm (11 games)

Dec 4,11,18 Jan 8, 15, 22, 29 Feb 5, 12, 19, 26

Middle School League - Sundays 8:00am-3:00pm (11 games)

Dec 4,11,18 Jan 8, 15, 22, 29 Feb 5, 12, 19, 26

- All games will be played at Ally Pond Sports Center
79-20 Winchester Blvd., Queens Village, NY 11427
One of the best indoor turf lacrosse facilities in NY. Field 60 X 40 indoor turf
- \$3575 per team
- 18 players recommended
(additional players over 18 team roster will be charged \$25 per player)
- 8 v 8
- All Participant's must be members of US Lacrosse.
At sign-ups you must provide proof of USL Insurance!!! No EXCEPTIONS
- Fee Includes officials, reversible for each player, excellent turf field
- NO REFUNDS FOR ANY REASON
- Each team will play one game per week with the game time changing on a weekly basis.
- \$300 non refundable deposit due Oct 15. Full Team fee Due Nov 1

DIRECTIONS:

From Eastern Long Island:

Take the Northern State Parkway (West) to Grand Central Pkwy (West) to Exit 23 (toward Union Tpke/Cross Island Pkwy) follow sign to Union Tpke go to 1st light make a left onto Union Tpke. Go to the 2nd light and make a left turn onto Winchester Blvd. Make a left into the 2nd driveway on your left that is Alley Pond Park.

OR

Take the Long Island Expwy (West) to the Exit 31 toward Cross Island Pkwy (South). To Exit 28B Union Turnpike. Make a quick right turn go to light make a left onto Union Turnpike. Go to the next light make a right onto Winchester Blvd. Make a left into the big parking lot on your left.

VARSIITY WINTER LEAGUE 2011-2012

For questions and more information:

CALL: 516-767-7862

FAX: 516-767-2421

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

TEAM NAME	TEAM CONTACT
LAST NAME	FIRST NAME
ADDRESS	
CITY/STATE/ZIP	
AGE	HIGH SCHOOL GRADE YEAR
EMAIL ADDRESS	COACH'S NAME
EMERGENCY CONTACT	EMERGENCY PHONE NUMBER
BEST CONTACT PERSON & PHONE NUMBER	
AGE GROUP: <input type="checkbox"/> Varsity League <input type="checkbox"/> Middle School League	
T-SHIRT: S M L XL	

I give my daughter _____ permission to participate in the Black Diamond Lacrosse Varsity Winter League. 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 my daughter is 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 her US Lacrosse membership. I also understand that 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 #