



Blue Ridge Lacrosse Club

2010 Indoor Session Sign Ups

January 10, 17, 24, 31
February 7, 14*

*February 14 is a weather make-up date

REGISTRATION FORM

Player Name Date Of Birth

Parent(S) Name Player's Current Grade

Home Address City / State / Zip

(_____) _____
Day Phone Evening Phone

(_____) _____
Parent Cell Phone Alternate Parent Cell Phone

Parent Email Alternate Parent Email

Players must bring their own equipment

Boys: Helmet, gloves, shoulder & arm pads, mouth guard and protective cup are mandatory.

Girls: Protective goggles and mouth guard are mandatory. Gloves are optional.

REGISTRATION FEES

CHECK ONE:

- _____ \$50 – Boys Grades 3-4 Time – 12:30pm to 1:30pm
- _____ \$50 – Boys Grades 5-6 Time – 1:45pm to 3:00pm
- _____ \$50 – Boys Grades 7-8 Time – 3:15pm to 4:30pm
- _____ \$50 – Girls Grades 4 & up Time – 4:45pm to 6:00pm

* All sessions held at the Lynchburg Armory.

RELEASE OF ALL CLAIMS

In consideration of the permission granted to me/my child by the Blue Ridge Lacrosse Club Board of Directors, I hereby release and hold harmless the Blue Ridge Lacrosse Club, its officers, coaches, officials and volunteers from all actions, causes of actions, damages, claims, or demand which I, my heirs, executors, administrators, or assigns may have against the Blue Ridge Lacrosse Club and/or described parties for all personal injuries known or unknown incurred by participation in this activity.

I, the undersigned, have read this release and understand all its terms.

Signature (Parent/Guardian for youth 17 years of age and younger) Date

Please check if you would be interested in coaching or helping out with one of the teams.

Mail this form to BRLC, P.O. Box 12264, Lynchburg, VA 24506-2264
For more information, go to www.blueridgelax.org.

FOR OFFICE USE ONLY: Amount Paid \$ _____ Check # _____ Date: _____