



## ***2019 Boys and Girls Lacrosse Mini-Clinic Registration!!***

We are dedicated to fair and consistent treatment of all players. We continue to gauge our success by the number of players returning each year. Each year we see 60 to 70 new players right up through the 8<sup>th</sup> grade. It is never too late to start and our coaches are committed to teaching fundamentals and helping all kids have a great time playing lacrosse.

**Who:** Kindergarten, First and Second Grade Boys and Girls

**Dates:** Sundays April 7, 14, 28; May 5, 19

**\*\*No Session on April 21<sup>st</sup> (Easter) and May 12<sup>th</sup> (Mother's Day)**

**Time:** All sessions will be from 3 - 4 PM

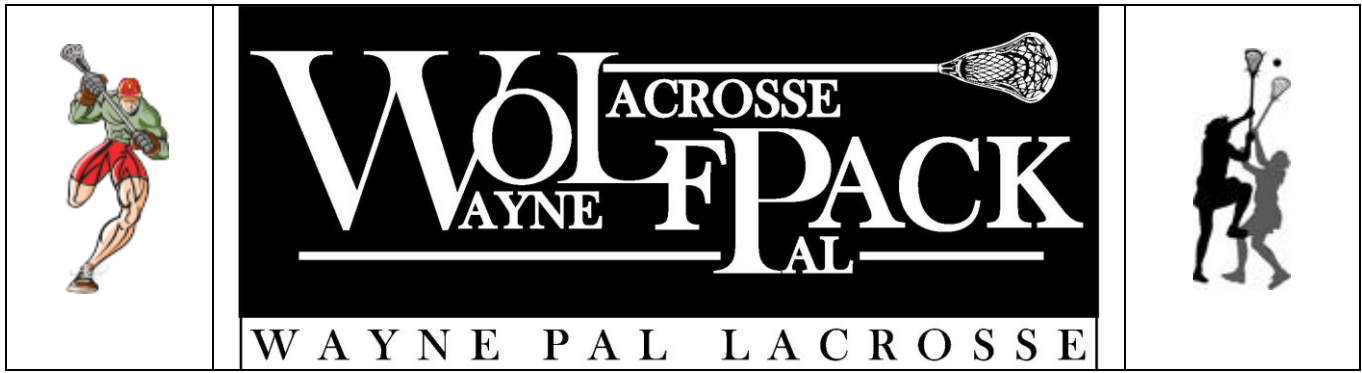
**Location:** Wayne Valley High School, Front Field

### **What to Bring:**

- The only required equipment for this clinic is a lacrosse stick
- Full equipment is not necessary, but you are welcome to bring it if you wish
- We will be playing with soft indoor lacrosse balls
- Players should bring their own water or sports drinks

### **Objective:**

- To have fun and develop a love for the sport!
- To learn the fundamental skills of the game such as holding the stick, cradling, picking up ground balls, passing and catching
- STATION WORK so the players all get a ton of repetitions. We will also give drills that the kids can do to keep working on their skill development after the clinics end.



Register at the Wayne PAL, by Mail, or online at [www.waynepal.org](http://www.waynepal.org)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Grade in School: \_\_\_\_\_ Birth Date: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ @ \_\_\_\_\_

Phone Number: \_\_\_\_\_ School: \_\_\_\_\_

**Program Fees:**

Kindergarten to 2<sup>nd</sup> Grade Mini-Clinic (Boys and Girls) \$50

I/We the parents or guardians of the above named child hereby give My/Our approval to His/Her participation in the above activity. I/We assume all risks and hazards incident to such participation, including transportation to and from the various activities. I/We realize there is a risk of injury to children Playing/Participating in P.A.L. Activities, Sports and I/We do hereby release, absolve, indemnify and agree to hold harmless the Wayne PAL Athletic League, directors, coaches, officers, trustees, sponsors, commissioners, participants, and persons transporting And/Or supervising, And/Or coaching My/Our child.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Please complete and sign this form, and return with the appropriate program fee to:

Wayne PAL - Lacrosse  
100 PAL Drive  
Wayne, NJ 07470