

## IMPORTANT FACTS

### Day Campers

Everyone will register on June 7th from 10:00 am - 11:00 am. Pick up that night will be at 8:30 pm. The next two days, camp drop off at 8:30 am and pick up at 8:30 pm. On the last day drop off again is at 8:30 am and camp check out will be at 11:30 am.

### Equipment

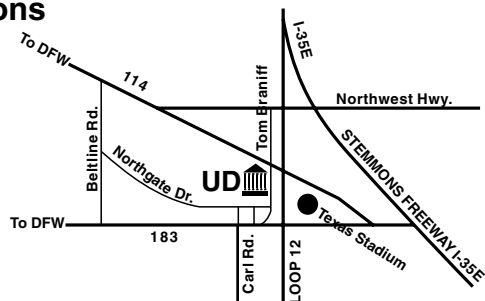
Each camper should bring his own equipment. The following equipment is mandatory for play: helmet, gloves, arm pads, shoulder pads and mouth guard. Goalies: chest protector, cup and throat guard.

### Typical Daily Schedule

7:30 - 8:30 am ... Wake Up, Breakfast  
8:45 am ..... Attendance  
9:00 - 11:00 am ... Campers will receive lots of Individual and position instruction.  
11:45 - 1:00 pm .. Lunch  
1:45 pm ..... Attendance  
2:00 - 4:15 pm ... Individual and Team concepts  
4:30 - 5:30 pm ... Dinner  
6:00 pm ..... Attendance  
6:15 - 8:00 pm ... Team scrimmages and games  
8:15 - 8:30 pm ... Daily wrap-up  
9:00 - 10:30 pm .. Camp store is available + Pizza, Raffles, Movies and Game Films.  
10:30 pm ..... Room Check by Staff  
11:00 pm ..... Lights out.

### 24 Hour Certified Trainer and Adult Supervision

### Directions



All Star Lacrosse Inc.  
PO Box 7862 • Lancaster, PA 17604

Website - [www.starlacrosse.com](http://www.starlacrosse.com)  
Camp E-Mail - [info@starlacrosse.com](mailto:info@starlacrosse.com)



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## in Texas - BOYS

*Directed by top NCAA Coaches*



### UNIVERSITY OF DALLAS

*“Learn the Exciting Game of Lacrosse from the Best Around”*

### SESSION FOR 2009

Sunday, June 7th to Wednesday, June 10th

**INSIDE LACROSSE**

Pre-registered campers receive a FREE one year subscription to Inside Lacrosse magazine.

## Texas All -Star Boys Lacrosse Camp Application

Please Print Information Clearly

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

E-Mail \_\_\_\_\_

**All confirmations will be sent via e-mail two weeks prior to start of camp.**

Field Position \_\_\_\_\_ Entering Grade \_\_\_\_\_

School Attending: \_\_\_\_\_

Check One: ☐ Overnight ☐ Day

Roommate Requested (*Overnight Campers Only*)

1st Choice: \_\_\_\_\_

2nd Choice: \_\_\_\_\_

**How did you hear about the All Star lacrosse Camps?**

☐ Internet / Active / ETeamz ☐ Inside Lacrosse

☐ Newspaper Advertisement ☐ Friend

☐ School / Lacrosse Organization

☐ Other \_\_\_\_\_

### MEDICAL INFORMATION

(Please list any and all medical conditions, medications & allergies)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IF YOU DO NOT PAY IN FULL A \$150 NON-REFUNDABLE DEPOSIT MUST ACCOMPANY THIS APPLICATION. CAMPERS WILL BE ACCEPTED ON A FIRST COME BASIS. IF NOT PAID IN FULL, BALANCE DUE UPON ARRIVAL AT CAMP.**

### MAIL APPLICATION AND DEPOSIT TO:

#### Checks Payable To:

All Star Lacrosse Inc.

PO Box 7862 • Lancaster, PA 17604

#### Register in Full Online with Credit Card:

www.starlacrosse.com

#### For More Information:

www.starlacrosse.com

Email: info@starlacrosse.com

## ALL STAR LACROSSE CAMP

For the past five years the camp has assembled a staff of coaches that include members of the MLL, US World Team Players, Former and Current All-Americans, Top College / High School coaches, and the best college players in the game. These coaches and players are dedicated to teaching and watching you play. You will improve upon your individual and team skills throughout the week.

Come join us at University of Dallas for a week of **Fun, Excellent Competition, a Chance to be Recruited, and Lots of Personal Skills Development.**

### 24 Hour Certified Trainer and Adult Supervision

### LEARN

Individual skills and position development along with Team Competition and Sportsmanship from top college coaches and players.

### STRENGTH AND CONDITIONING SESSION:

This session is designed to train athletes in techniques that will improve their Lacrosse agility, speed, power and endurance. The All Star Lacrosse Staff has combined our knowledge of sports medicine and lacrosse to provide you with tips, exercises, and drills that will give you the leading edge needed to beat your opponent in every aspect of the game.

### ELIGIBILITY

Boys ages 8 through those entering their senior year in high school. All levels of experience welcomed.

### TUITION

Overnight Campers - \$485 - Includes all meals, room, camp jersey, prizes and instruction.

Day Campers - \$395 - Includes lunch, dinner, camp jersey, prizes and instruction.

Sibling Discount: \$25 OFF for each additional child from the same family.

**A non-refundable deposit of \$150 is required with application.** \*\*A credit card charge or cleared check automatically reserves your camp spot.\*\*

### REGISTRATION

**Registration:** Sunday, June 7th, 10 - 11 am

**Checkout:** Wednesday, June 10th, 11:30 am

### UNIVERSITY OF DALLAS

The University of Dallas is located in Irving, Texas, a city of 150,000 residents on the northwest boundary of the city of Dallas. In the center of the metroplex, the campus is ten miles from the Dallas-Fort Worth International Airport, 15 minutes from downtown Dallas and 40 minutes away from Fort Worth. Refer to map on reverse side.

**FREE JERSEY TO ALL CAMPERS**

## COACHING STAFF - Past and Present

**Todd Cavallaro** - Head Coach at Franklin & Marshall College, former offensive Coordinator at the University of Pennsylvania. Previous Offensive Coordinator at Johns Hopkins University and the University of North Carolina. Four year starting midfielder at JHU from 1991 - 1994, Captain of the 1994 Blue Jay Lacrosse Team. Led the Blue Jays to four straight NCAA appearances. Helped coach Washington College to their first Div. III National Championship in 1998.

**Brian Voelker** - Currently the Head Coach of the University of Pennsylvania. Former head coach of the Baltimore Bayhawks and former defensive coordinator at Johns Hopkins University. Three time All-American at JHU from 1989-91. 1992-1998 Member of MILL/NLL Philadelphia Wings. Team U.S.A. member in 1994 and 1998. Selected to 1998 World Team and selected World's Best Defenseman. Learn from the best.

**A.T. Bailey** - A starting midfielder at Johns Hopkins University. In 1998, A.T. was selected to play in the North / South All Star game. A dominant face-off man during his four year career. A 1998 graduate of Hopkins, A.T. is currently a sales representative for Lax World in Baltimore.

**Josh Pico** - One of the best players to come out of Texas, played at Johns Hopkins University, currently coaches South Lake Texas.

**Adam Zuderhaven** - All American at Deleware, helped Deleware reach the final four, plays in the MLL, and currently works at Lax World.

**As well as other top Division I college coaches and the finest college players in the game today from UNC, Johns Hopkins, Syracuse, Towson, Princeton, World Team, MLL and other big time lacrosse schools!!!!**

**Learn From the Best Around!**

**Participation Agreement**  
**Medical Release and Liability Waiver**

**Event ATTENDING** All Star Lacrosse, INC **DATE OF CAMP** \_\_\_\_\_

Both applicant participant and parent or guardian, if participant is under age 18, (hereafter referred to as "Undersigned") must read carefully and sign. Form should be submitted upon arrival on the first day of camp.

**NOTICE**

Undersigned is fully aware that lacrosse (hereinafter referred to as "activity") as taught and sponsored by the All Star Lacrosse Camp, Inc. (hereinafter referred to as the "the organization") is a contact sport and that participating in tournaments, games, matches and practicing for this sport will be dangerous activity involving a great risk of injury.

**RISKS ASSUMED**

Undersigned understand that the dangers and risks of learning, competing in or participating for the activity include, but are not limited to death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other parts of the muscular skeletal systems, and serious injury or impairment to other parts of my body, general health and well-being. Undersigned understand that the dangers and risks of contests or practicing for the activity may result not in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities, and generally to enjoy life. Undersigned understand that he or she assumes the risk of injury by participating in the Organization's program.

**REQUIREMENT TO OBEY INSTRUCTIONS**

Because of the dangers of participating in this activity, Undersigned recognize the important of the following coaches' instructions regarding techniques, training, conditioning, and other necessary rules, and to agree to obey such instructions.

**HOLD HARMLESS**

In consideration of permitting Undersigned to take instruction and to engage in all activities related to the Organization's program, including but not limited to trying out, practicing or competing, Undersigned hereby assume all risks associated with such activities and agree to hold harmless the Organization, its employees, agents, representatives, coaches, and volunteers, from any and all liability, actions, causes of action, debts, claims, or demands of any kind and nature whatsoever which may arise by or in connection with my participation in the Organization's program.

**RELEASE OF LIABILITY**

The terms hereof shall serve as a release of liability and assumption of risk on the part of Undersigned and his or her heirs, estate, executor, administrator, assignees, and for all members of my family. Undersigned agree that neither the Organization, nor the employees or volunteers of said Organization shall in any way be held liable for any accident or injury in any way received on account of, or while engaged in, any activity sponsored by said Organization. Undersigned further agree that neither the aforementioned Organization nor any of its employees, volunteers, or students shall be responsible for the payment of any bills rendered for medical services as a result of such accidents or injuries.

**RELEASE FOR TREATMENT**

I do give permission to the Athletic Medical Staff to carry out such diagnostic and therapeutic procedures as may be necessary for Undersigned. I also permit such procedures to be carried out at and by one of the local hospitals in the event that Undersigned has been referred to or taken there for emergency care.

Each camper is required to fill in the following information:

**Insurance Company** \_\_\_\_\_ **Policy #** \_\_\_\_\_

**Birth date:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Name of Participant (Please Print)**

<b>Signature of Participant</b>	<b>Date</b>	<b>Signature of Parent or Legal Guardian (if participant is a Minor)</b>	<b>Date</b>
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If an emergency should arise, please list two people who can be notified:

Name \_\_\_\_\_  
Relationship \_\_\_\_\_  
Phone: Home \_\_\_\_\_  
Work/Cell \_\_\_\_\_

Name \_\_\_\_\_  
Relationship \_\_\_\_\_  
Phone: Home \_\_\_\_\_  
Work/Cell \_\_\_\_\_