



**SPRING LAKE
LACROSSE
ORGANIZATION
High School**

SPRING 2013 - REGISTRATION

***Player/Parents Meeting
Wednesday, January 30th @ 5:30 pm
Spring Lake Middle School Auditorium***

- Spring Lake Lacrosse Organization is open to all 9th-12th grade students.
- The organization is planning on three high school teams (Varsity, Junior Varsity and Freshman) this year.
- Games are currently being scheduled with other local high school teams. Practice will begin on March 11th with our first game on March 23rd.
- SL Lacrosse Organization will provide game uniforms. The athlete provides their cleats and equipment. Lacrosse equipment costs can range between \$200-\$300 for pads, gloves, helmet and stick.
- Equipment professionals (Athletes Connection, Grand Rapids, MI 616-447-8900) will be available at the January 30th meeting for equipment fittings and sales. They will be offering significant cost savings for purchases made that evening.
- Spring Lake Lacrosse Organization will be open to all. Lack of funds will not be a barrier to an athlete participating. Financial Assistance will be available for anyone needing help with registration fees or equipment.

The registration fee for the season will be \$250 and includes:

- Coaching, games, tournament registration, referee fees and team equipment.
- Players will be responsible for paying the annual Player's fee with the Athletic Office.
- All players will receive a pre-game shooting shirt.

If you have any questions please contact any of the following SLLO board members:

Coach Doug Sharp	dsharp22@live.com	616-204-5416
Nina McKeough	nina@mckeough.com	
Jamie Roberge	jroberge17@yahoo.com	
Kelly Palmer	kspalmer@chartermi.net	

<http://laxteams.net/springlake>



**Spring Lake Lacrosse
REGISTRATION FORM
High School
SPRING 2013**

REGISTRATION INFORMATION

Last Name: _____ First Name: _____

Date of Birth: _____ LAX Experience: 1yr - 2yr - 3yr - 4yr

School: _____ Grade: _____ Positions Played: Attack, Midfield, Defense, Goalie

Parent:

Name: _____ Home Phone: _____

Address: _____ City & Zip Code: _____

Email: _____ Work or Cell Phone: _____

(Important! Stay informed! All communications primarily conducted via email.)

Parent:

Name: _____ Home Phone: _____

Address: _____ City & Zip Code: _____

Email: _____ Work or Cell Phone: _____

Emergency Contact:

Name: _____ Phone: _____

FEES:

Spring Lake Lacrosse Organization will be open to all. Lack of funds will not be a barrier to an athlete participating. Financial Assistance will be available for fees and equipment. Contact any of the board members for more information.

High School Registration Fee: \$250.00 Check #: _____ Cash: _____ Registrar: _____

Please make checks payable to: Spring Lake Lacrosse Organization

REGISTRATION DEADLINE: February 20, 2013

Registration forms may be mailed to: Spring Lake Lacrosse Org., P.O. Box 396 Spring Lake, MI 49456

<http://laxteams.net/springlake>

SPRING LAKE LACROSSE Parental Consent Form



PLAYERS NAME: _____

PHOTO RELEASE:

I understand that photography and/or video of participants may be procured during activities and used in promotional materials, including publication on the Spring Lake Lacrosse Organization website. I consent to the use of images or likenesses of my child/ward for promotional purposes by the Spring Lake Lacrosse Organization.

Parent/Guardian Permission Signature _____ Date _____

WAIVER AND RELEASE:

My child/ward is in good health and has my full permission to participate in the Spring Lake Lacrosse program. My child/ward has no existing or prior sickness, illness, disease or bodily injury that is contradictory to participation. I fully understand that lacrosse is a contact sport and that physical injury may occur during the course of participation. I certify that my child/ward has my permission and consent to participate in the Spring Lake Lacrosse Organization program during the coming season. I fully release and hold harmless the Spring Lake Lacrosse Organization, its teams, coaches, field directors, managers, referees, sponsors, Board of Directors, officers, Spring Lake Public Schools or any others connected to the club for injuries sustained by my child in practice, game play or while being transported to or from Spring Lake Lacrosse Organization activities. Furthermore, I agree that I will not hold any doctor, nurse, team, coach or league official responsible for the consequences of any voluntary medical or first-aid treatment administered to my child as a result of any injury sustained in connection with Spring Lake Lacrosse Organization activities.

Parent/Guardian Signature _____ Date _____

Relationship to participant _____

MEDICAL TREATMENT PERMISSION

Known Medical Conditions: _____

Current Medications: _____

Primary Care Physician: _____ Primary Care Phone: _____

Insurance Company: _____ Insurance Co. Phone: _____

Policy & Group #: _____

Local Hospital Preference: _____

We (I) hereby authorize any member of the Spring Lake Lacrosse Organization Board of Directors, the Team Head Coach, Assistant Coach, or Team Manager to obtain medical treatment for the above named student athlete in our absence.

Signature of Parent/Guardian

Date



SPRING LAKE LACROSSE ORGANIZATION CODE OF CONDUCT

I, as a player, coach or parent, pledge to conduct myself in a manner that is consistent with Spring Lake Public Schools' high expectations of character.

Accordingly, I pledge to:

1. "Honor the Game"
2. Know and abide by the Spring Lake Athletic Department's Code of Conduct;
3. Demonstrate respect to other players, coaches, parents, officials and spectators;
4. Exhibit excellent sportsmanship and maintain composure while representing our organization. There will be zero tolerance for unsportsmanlike physical or verbal behavior, including profanity. Fighting of any kind will not be tolerated on or off the field.
5. Support the drug, alcohol, and tobacco free environment that is required for all Spring Lake athletes both on and off the field;
6. Never approach an opposing player, coach or game official in a threatening manner.

This contract and pledge must be signed by any player, coach and parent who wishes to participate in the Spring Lake Lacrosse Organization.

By signing this document, I agree to abide by and uphold the above stated "Code of Conduct" and understand that any violation of this Code either by commission or omission may result in discipline which may include but is not limited to the following:

- Letter of reprimand by the Spring Lake Lacrosse Organization Board
- Player suspension
- Permanent suspension for the season without refund
- Coach has the discretion to reduce/limit playing time for any violation of the Code of Conduct

PLAYER NAME : _____ GRADE: _____

PLAYER SIGNATURE : _____ DATE : _____

PARENT SIGNATURE : _____ DATE : _____

COACH SIGNATURE: _____ DATE: _____



Spring Lake Lacrosse Parent Volunteers

Player's Name: _____

Parent: _____
Phone: _____
Email: _____

Parent: _____
Phone: _____
Email: _____

Please review the list of needs and sign up the area that most interests you!

- Team Manager** – Assist coaching staff with email updates, handouts, coordinating volunteers, snacks, end of season party, awards.
- Equipment Coordinator/Assistant** – equipment storage, inventory, distribution, end of season collection and determine procurement needs.
- Team Involvement** – Plan end of season celebration, take photos. (circle areas of interest)

GAME DAY HELP (EACH TEAM WILL NEED PARENTS FOR EACH POSITION FOR EACH GAME)

- Press Box Personnel** – Announcing the game, Filming the game, Running the game clock.
- Bench Personnel** - Assist in preparing the field for play, setting up the bench area, running the game clock, keeping the official scorebook.
- Concessions** – Coordinating the food and drinks, working in the concession stand during games (JV parents work during Varsity games and vice versa, etc.)
- Apparel and raffle ticket sales** – sell team apparel and raffle tickets during game at table.
- Other:** _____

Do you have any fundraising ideas that could be done by the organization or players to raise money for dues and equipment scholarships?

