

# LADY RAIDERS LACROSSE CAMP



Enjoy five days of high-impact training and detailed instruction in the "fastest sport on two feet." Whether you are a beginning, intermediate, or advanced player, you will learn sound fundamentals through demonstrations, practice drills, and competitions. Under the guidance of the Raiders Women's Lacrosse coaches you will learn basic & advanced principles necessary to be a competitive athlete in women's lacrosse.

## BENEFITS

- Refine your basic & advanced lacrosse skills—passing, dodging, shooting, & defending.
- Receive one-on-one instruction from Varsity Raider's coaches and players.
- Increase performance through drills & demonstrations.
- Learn strategy & basic fundamentals through chalk talks.
- Increase and improve shooting skills.
- Train at your specific position and skill level.
- Learn fun team development drills.
- Develop & fine-tune passing/catching skills.

## WHAT TO BRING

- Lacrosse Stick
- Mouth Guard and Goggles
- Cleats and Sneakers
- Water
- Sunscreen

**WHEN:**  
JULY 19- JULY 23<sup>RD</sup>

**WHO:**  
RISING 6<sup>TH</sup> - RISING 9<sup>TH</sup> GRADERS

**TIME:**  
8:00AM TO 11:00AM  
AT AHS

**CAMP PACKAGE:**  
\$125

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## REGISTRATION DEADLINE JULY 2

*Please mail registration forms & checks (made payable to AHS) to Gayle Rutledge  
6130 Song Breeze Trace Johns Creek, GA 30097*

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

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

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

E-mail: \_\_\_\_\_ Position(s): \_\_\_\_\_

Age: \_\_\_\_\_ Grade Fall '10: \_\_\_\_\_ Experience: \_\_\_\_\_ Skill Level: \_\_\_\_\_

School: \_\_\_\_\_ T-Shirt Size: YS YM YL S M L

Number of Participants: \_\_\_\_\_ Cost: \_\_\_\_\_ **Total:** \_\_\_\_\_

**Parent/Guardian Name and Contact Number:** \_\_\_\_\_

Parents Release:

I will not hold the Fulton County Board of Education, Alpharetta High School, AHS Camp, or the coaches responsible for any illness or injury to my child. Further, this is to certify that I have insurance to cover any injury that might occur during participation and travel to camp.

Insurance Company & Policy Number: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Important Medical Information: \_\_\_\_\_

*All applications will be handled on a first-come first-served basis.*

*Please make checks payable to Alpharetta High School (AHS) and mail to*

*Gayle Rutledge (address above) or email [gaylec\\_rutledge@yahoo.com](mailto:gaylec_rutledge@yahoo.com) with questions.*

**Cancellation Policy:** \$50.00 prior to July 12th and \$75.00 after July 12th (no-shows will not be refunded)