

IMPORTANT FACTS

Day Campers

Everyone will register on Thursday, June 18th 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 are required to bring necessary equipment.

Typical Daily Schedule

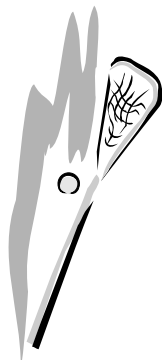
7:30 - 8:30 am Wake Up, Breakfast
8:45 am Attendance
9:00 - 11:00 am Campers will receive lots of Individual and position instruction.
11:45 - 1:00 pm Lunch
1:45 pm Attendance
2:00 - 4:15 pm Individual and Team concepts
4:30 - 5:30 pm Dinner
6:00 pm Attendance
6:15 - 8:00 pm Team scrimmages and games
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

For more information about the camp contact:

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

Camp E-Mail - info@starlacrosse.com
Website - starlacrosse.com



ALL STAR LACROSSE INC.
PO Box 7862
Lancaster, PA 17604
E-Mail - info@starlacrosse.com
Website - starlacrosse.com

Franklin & Marshall College ALL-STAR LACROSSE CAMP

**DIRECTED BY TODD CAVALLARO
COACH AT FRANKLIN &
MARSHALL COLLEGE and former
player at Johns Hopkins University.
Along with top NCAA College
Coaches and players.**



www.starlacrosse.com

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

SESSION FOR 2009

Thursday, June 18th to Sunday, June 21st

**INSIDE
LACROSSE**

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



Franklin & Marshall College All-Star 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.

Position _____ Entering Grade _____

Check One: Overnight Day

Roommate Requested _____
(Overnight Campers Only)

How did you hear about the All Star lacrosse Camps?

- Internet / Active / ETeamz Inside Lacrosse
 Newspaper Advertisement Friend
 School / Lacrosse Organization
 Other _____

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

MEDICAL RELEASE

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

MAIL APPLICATION AND DEPOSIT TO:

Checks Payable To:

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

For More Information Call the
Email: info@starlacrosse.com
Website: starlacrosse.com

ALL-STAR LACROSSE CAMP

The camp has assembled a staff of coaches that include members of Franklin & Marshall College, 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 Franklin & Marshall College for a week of **Fun, Excellent Competition, a Chance to be Recruited, and Lots of Personal Skills Development.**

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.

Randy Marks - Assistant Coach at Franklin & Marshall College. Coach Marks serves as the Recruiting Coordinator and brings a wealth of experience in every phase of the game to the F&M program. The head men's lacrosse coach at Villanova University from 1982-2006, viewed as one of the top coaches in Division I lacrosse over his tenure at Villanova. Coach Marks made an immediate impact on the F&M program this season.

Casey Kear - Assistant Coach at Franklin & Marshall College. Coach Kear serves as F&M's Defensive Coordinator. Coach Kear was a standout defenseman at Albany for Coach Marr and also earned a NJCAA National championship at Herkimer CC. Coach Kear has a great sense and ability to develop defensive talent and elevate player's games.

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.

ELIGIBILITY

Boys ages 8 through those entering their senior year in high school. *High School division will be very competitive.*

TUITION

Overnight Campers - \$485 - Includes all meals, room, camp jersey, prizes and instruction. **A non-refundable deposit of \$150 is required with application.**

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

Check In: Thursday, June 18th
10:00 am - 11:00 am

Check Out: Sunday, June 21st - 11:30 pm

The All Star Staff has consisted of coaches, players, and All-Americans from the following Top Lacrosse College and Universities:



- Johns Hopkins
- Princeton
- Maryland
- Hofstra
- Hobart
- Towson
- Delaware
- Pennsylvania
- Albany
- Ohio State
- Franklin & Marshall College
- Limestone
- Lehigh
- Stonybrook
- Geneseo
- Georgetown
- North Carolina
- Syracuse
- St. Vincent
- Brown
- Drexel
- Loyola
- Rutgers
- UMBC
- Salisbury
- Virginia Wesleyan
- Lynchburg
- Elmira
- Washington College
- Yale
- St. Lawrence

OUR MISSION

Our mission for all of our professionally run camps, clinics, and tournaments is to provide each and every individual with a total lacrosse experience. We strive to develop individual skills, teamwork, and sportsmanship for all of our young athletes.

OUR PROGRAMS

Our programs are designed to give each player, regardless of skill level, what it takes to fulfill their goals and reach their highest potential in a safe environment. At each of our camps, the veteran players have an excellent opportunity to showcase and improve their skills with top collegiate coaches. The novice players will learn basic fundamentals and improve their overall lacrosse game.

TESTIMONIAL

My son, Zachary Werblo, returned today from Lacrosse Camp. He loved it. He went Sunday afternoon as a day-camper and returned Monday morning prepared to spend the week as an over-night camper. Thanks for the great camp. ~ Terry L. Werblo

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) _____

Signature of Participant _____

Date _____

**Signature of Parent or Legal Guardian
(if participant is a Minor)** _____ **Date** _____

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 _____