

Ursinus College Men's Lacrosse Clinic

August 9th, 2018

Open to HS Boys graduating in 2019 2020 2021

Ursinus College Men's Lacrosse will host a One Day Clinic

open to all prospective student-athletes graduating in 2019, 2020, 2021.

Participants will have the opportunity to work with Head Coach Jamie Steele and Staff.

Concepts to be covered

- Stick Skills
- Offensive Fundamentals
- Defensive Fundamentals
- Advanced Concepts
 - Attacking in Early Offense, Setting Defensive Traps, Playing Offense with Defensive Personnel, Attacking in Odd Man Situations, Playing Fast in Transition

55 Players (4 GK 51 Field Players) Maximum

UC Team Gear for Sale Following the event!

SCHEDULE:

- 9:00am.....CHECK IN
 FLB Field House
 - 9:30-11:00am.Stick Skills/Fundamentals Patterson Field
 - 11:05-11:45amLUNCH

Bears Den

- 11:45-12:30pm.....Advanced Concepts Patterson Field
- 12:30-1:30pm.....Scrimmage

Patterson Field

1:40-3:15pm.....Q+A/Campus Tour

Sign up online: <u>http://www.ursinuscamps.com/mens-lacrosse.cfm</u> or

Sign up by mail: Please return the Release, Indemnification, and Assumption of Risk form, and \$100 payment before **August 9th**, **2018**. ****Limited to 55 total players! Sign up ASAP****

Checks made payable to: Ursinus College Mail to: Ian Moore (Men's Lacrosse) Ursinus College 601 E. Main St Collegeville, PA 19426

COST: \$100 (Bring Your Own Lunch)

DETAILS:

- Patterson Field—Field Turf Surface
- FLB Field House—Weather Location
 - Please bring indoor shoes
- NATA certified Athletic Trainer on site
- Protective Gear, Mouth Guard, Stick are required

Any Questions contact: Ian Moore

Imoore@ursinus.edu

Ursinus College Men's Lacrosse Clinic

Name:	
Home Address:	
Player Email:	
Player Phone:	
High School:	
HS Graduation Year:	тм
Club Team Name:	
Release, Indemnification, and	nd Assumption of Risk
Activity: Ursinus College Men's Lacrosse Clinic	
Name of Participant:	
I am signing this Release so that I can par <mark>ticipate in <i>Ursinus Men's Laci</i> Release, Indemnification, and Assumption of Risk Statement covers all understand that if I have concerns about my health or ability to partici physician before deciding to participate in the Activity.</mark>	events and occurrences associated with the Activity. I
I acknowledge and understand the risks inherent with the activities ca unexpected events may occur and result in loss, harm, injury, or illness or observing the Activity or while I am traveling to or from the Activity College, <i>Men's Lacrosse program</i> , its sponsors, employees, volunteers subordinates, and any other persons connected to this event from any	s to me or damage to my property while I am participating in . I hereby agree to indemnify and hold harmless Ursinus , affiliates, officers, agents, successors and assigns,
In the event that I require emergency medical treatment, I give my per medication in accordance with the standard medical practice by licens <i>Lacrosse program</i> of all responsibility and consequences that may aris all financial responsibility as a result of the performed treatment.	ed medical personnel. I relieve Ursinus College, Men's
I consent to the provision of emergency medical treatment to the exte the doctor rendering treatment.	nt that the treatment is necessary in the medical opinion of
Signature of Participant:	Date:
If Particinant is under the age of 18 years. Parent or Legal Guard	lian must also sign:

If Participant is under the age of 18 years, Parent or Legal Guardian must also sign:

Signature of Parent / Guardian: ______ Date: ______