

2012 REGISTRATION  
DEADLINE:  
MARCH 16

## SHELburnE PARKS AND RECREATION YOUTH LACROSSE REGISTRATION FORM

P.O. Box 88  
Shelburne, VT 05482  
985-9551

### PARTICIPANT INFORMATION

FIRST NAME		LAST NAME	
DATE OF BIRTH		GRADE	
GENDER		HOME PHONE	
STREET ADDRESS		CITY, STATE, ZIP	
EMAIL ADDRESS (FOR SCHEDULE UPDATES, ETC.)			
SPECIAL NEEDS / MEDICAL CONDITIONS			

### PARENT/ GUARDIAN INFORMATION

1) FIRST NAME		LAST NAME	
HOME PHONE (IF DIFFERENT)		CELL PHONE	
WORK PHONE or Day Time contact #		ADDRESS (IF DIFFERENT)	
2) FIRST NAME		LAST NAME	
HOME PHONE (IF DIFFERENT)		CELL PHONE	
WORK PHONE or Day Time contact #		ADDRESS (IF DIFFERENT)	

PLEASE CHECK PROGRAM YOU ARE SIGNING UP FOR: **COST** (Make checks payable to Shelburne Recreation)

\*\* \$10.00 Late fee will be applied to all registrations received after the Deadline! \*\*

	NEW! KINDERGARTEN (Reg. Deadline April 11)	\$40.00 - includes a stick!
	CO-ED 1 - 2 <sup>nd</sup> GRADE (Reg. Deadline April 11)	\$40.00 - includes a stick!
	GIRLS 3 <sup>RD</sup> / 4 <sup>TH</sup> GRADE (Reg. Deadline March 16)	\$35.00
	BOYS 3 <sup>RD</sup> / 4 <sup>TH</sup> GRADE (Reg. Deadline March 16)	\$35.00 Requires a US Lacrosse Membership*
	GIRLS 5 <sup>TH</sup> / 6 <sup>TH</sup> GRADE (Reg. Deadline March 16)	\$35.00
	BOYS 5 <sup>TH</sup> / 6 <sup>TH</sup> GRADE (Reg. Deadline March 16)	\$35.00 Requires a US Lacrosse Membership*
	GIRLS 7 <sup>TH</sup> / 8 <sup>TH</sup> GRADE (Reg. Deadline March 16)	\$35.00
	BOYS 7 <sup>TH</sup> / 8 <sup>TH</sup> GRADE (Reg. Deadline March 16)	\$35.00 Requires a US Lacrosse Membership*

\*The Northern Vermont **Boys** Youth Lacrosse League requires that all players be registered U.S. Lacrosse Members. All participants will be required to register themselves with U.S. Lacrosse either online or by mail and provide Shelburne Recreation with your **U.S. Lacrosse Membership number by the Registration Deadline of March 16.**

**TO REGISTER:** go to [www.uslacrosse.org](http://www.uslacrosse.org) and register online or print off a Membership form to mail in. There is a \$25.00 annual fee. This Membership is required before playing in any games.

Check here if you are already a U.S. Lacrosse Member. Membership #: \_\_\_\_\_ Exp. \_\_\_\_\_  
(REQUIRED) Must be valid through June 2012!

I understand that injuries are a possibility as a result of this activity. I agree to hold the Town of Shelburne, Shelburne Parks & Recreation Department or anyone associated with this program harmless for any responsibility or liability from any injuries or property damage which may arise from my/my child's participation in this program. I also understand that my own medical and /or disability insurance will be used in the event of an injury or that I will be directly responsible for any medical costs. I am aware that the Parks & Recreation Department may take photographs of participants at programs, activities or special events. I am aware that the pictures may appear in future promotional materials, including brochures.

\_\_\_\_\_  
Signature of participant or parent/guardian

\_\_\_\_\_  
Date

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*For office use only:*

Amount Paid: \_\_\_\_\_

Balance Due: \_\_\_\_\_

Check #: \_\_\_\_\_

Payment Date: \_\_\_\_\_

US Lax Form complete \_\_\_\_\_

Paid: \_\_\_\_\_

US Lacrosse Membership #: \_\_\_\_\_