

# 2021 - JUNIOR STARS

## WINTER INDOOR LACROSSE SESSIONS

HARRIS CAMPS

### Elementary Indoor Lacrosse (1<sup>st</sup> -5<sup>th</sup> grade)

TIME: 6:30-8pm

DATES: Fridays: January 8, 15, 22, 29/ February 5, 12

Location: Dock Mennonite Academy – 1000 Forty Foot Road, Lansdale, Pa. 19446

### Middle School Indoor Lacrosse (6<sup>th</sup>/7<sup>th</sup>/8<sup>TH</sup>/ /9<sup>th</sup> grade):

TIME: 6:30-8pm

DATES: Fridays: January 8, 15, 22, 29 / February 5, 12

Location: Dock Mennonite Academy – 1000 Forty Foot Road, Lansdale, Pa. 19446



### F.Y.I

- 1) Fee: \$100 per session (winter)
- 2.) Deadline: January 1, 2021 (\$20 late fee after 1/1)
- 3.) All players must have lacrosse stick (can borrow if needed), mouthguard, goggles, sneakers, and water bottle.
- 4.) Please make checks payable to: Souderton Strikers
- 5.) Send applications to: Michelle Waldspurger 55 Diamond Street, Hatfield, Pa. 19440
- 6.) Questions? Michelle 215-593-5011(text) or MLMWfieldhockey@gmail.com
- 7.) Sessions will include stickwork, drills, along with indoor game play.
- 8.) Girls will be divided by age and experience as much as possible for game play. Space will be limited...register early!!! We are non-profit organization. No refunds

Website – [www.soudertonstrikers.com](http://www.soudertonstrikers.com)

**\*\*\*Confirmation/Information along with snow cancellations will be sent by email\*\*\***

LOCATION - Dock Mennonite Academy – 1000 Forty Foot Road, Lansdale, Pa. 19446

### REGISTRATION – DETACH AND COMPLETE (KEEP TOP SECTION)

**NAME** \_\_\_\_\_ **SCHOOL** \_\_\_\_\_  
**ADDRESS** \_\_\_\_\_ **GRADE** \_\_\_\_\_ **Position** \_\_\_\_\_  
\_\_\_\_\_ **Emergency Contact #**( ) \_\_\_\_\_

**EMAIL** \_\_\_\_\_ **Age Group:** (Elem) \_\_\_\_\_ (Middle School) \_\_\_\_\_

### INSURANCE WAIVER:

**Session:** Winter \_\_\_\_\_

INSURANCE COVERAGE IS NOT INCLUDED IN THE INDOOR LACROSSE SESSIONS STATED ABOVE. WE ASK THAT A PARENT OR GUARDIAN NOT HOLD SOUDERTON STRIKERS OR DOCK MENNONITE ACADEMY OR ANYONE INVOLVED IN THE THIS PROGRAM LIABLE FOR ANY INJURY EXPERIENCED DURING THESE SESSIONS.

A SIGNATURE IS REQUIRED TO INDICATE AGREEMENT WITH THIS WAIVER.

**SIGNATURE**(PARENT/GUARDIAN) \_\_\_\_\_ **DATE** \_\_\_\_\_