

Passaic Valley LAX Club: Registration 2013

Lacrosse Clinics/Practice will begin in mid-March!

Cedar Grove ~ Little Falls ~ Totowa ~ Woodland Park

Spring Season: Grades 3rd to 8th	~ Boys & Girls ~ All Skill Levels
Registration Fee	\$110
US Lacrosse Membership	\$25
Approximate Equipment Cost	\$200
Weekly Commitment	3 Days a Week
Schedules: Practice & Games	TBA
Parent/Player Meeting	TBA
Start of Season	March 25, 2013

Registration Process:

1. Remit check or money order along with completed Registration Form, Parental Waiver & Consent Form and Players/Parents Code of Conduct Form to:.

Mail in registration to:

John McGowan c/o Passaic Valley LAX Club 92 Kingwood Drive Little Falls, NJ 07424 Please mail and do not hand deliver

Drop off registration at:

Little Falls Rec Center c/o Passaic Valley LAX Club 160 Paterson Ave Little Falls, NJ 07424 by Sunday, March 24, 2013

- 2. A \$110 registration fee is due before First Practice.
- 3. Checks should be made out to: <u>Passaic Valley LAX Club</u>

 There will be No Refunds on registration fee.
- 4. US Lacrosse is membership is <u>required</u> and is paid separately at <u>www.uslacrosse.org</u> Step #4, in registration, go to Program/Team Affiliation, select New, and enter <u>Passaic Valley LAX Club</u>. <u>US Lacrosse membership must be completed/renewed, prior to first practice, it will be confirmed.</u>

Passaic Valley LAX Club Registration Form John McGowan ◆ PV.LAXC@yahoo.com ◆ 973-979-2472

	eyanoo.com * 7/3 7/7 24/2
Name	I would like to be informed of LAX clinics for: □1st □2nd
Address City:	ST: Zip:
Contact I	Contact II
Contact I Phone	Contact II Phone
E-mail	E-mail
Date of Birth Age as of April 1	Grade: □3rd □4th □5th □6th □7th □8th
Years LAX Experience: Position:	
Shirt Size: YS YM YL AS AM AL AXL	Pants Size: S YM YL AS AM AL AXL
Equipment Required to Participate: LAX Stick (vary by position), shoulder pads, NOCSAE	Strapped mouthpieces, athletic supporters, gloves, arm pads, E Certified Helmet, molded/turf cleats
INTERESTED IN COACHING: COACH* ASST. COA	CH* Team Parent LAX Experience:
	Rutgers Carded Background Check Completed – US LAX coaches must be CARDED & BACKGROUND CHECK
TEAM SPONSORSHIP FEE: \$150.00	
Team Sponsor Name Contact	ct Contact Number
REGISTRAR'S USE ONLY: # of Players FEE AMOUNT	[CASH CHECK# AMOUNT]



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Passaic Valley LAX Club 2013 Spring Lacrosse Registration is open to residents of the following towns:

Little Falls ~ Woodland Park Cedar Grove ~ Totowa ~

Passaic Valley LAX Club: Town Contacts

Cedar Grove: Kevin Brown

201-303-3645

kbrown@rtptech.com

Little Falls:

John McGowan 973-979-2472

PV.LAXC@yahoo.com

Woodland Park:

Totowa:

TBA

TBA

Fees:

NOTE: Any registrations received after the deadline will be placed on a waiting list. Openings at each level will be filled from the list by date of submission. Under certain circumstances the PV LAX Club may limit the number of teams or players per such teams in an effort to be fair to all coaches and participants involved in the program.

US LACROSSE | All players and coaches must be registered with US Lacrosse prior to stepping on the field. US Lacrosse provides insurance for all players and coaches when participating in any practice, game and/or tournament play. The cost is \$25 for Youth Players, \$35 for High School Players and \$50 for Adults. In addition to the insurance benefits, members receive a monthly edition of Lacrosse Magazine and periodic discounts for lacrosse related items, services and events. To register or check your current membership status, you may do so at:

www.uslacrosse.org/TopNav/Membership/USLacrosseMembership.aspx

PROGRAM OVERVIEW | The goal of the Passaic Valley LAX Club is to support 3 Grade Level Lacrosse Teams {3rd & 4th, 5th & 6th, 7th & 8th}. Rosters may be limited based on a first come first served basis. We intend on playing a full schedule with games in and out of the towns each week during the season. These teams will be playing March through early June, with games and practices 2-3 nights per week. We try to schedule at least 8-10 games for each level but cannot guarantee it. Playing time does correspond to practice attendance and those who show a high level of team commitment will be rewarded on the playing field. 1st and 2nd Grade Level Clinics are planned for later in the spring.

THE GOAL OF THE PASSAIC VALLEY LAX CLUB IS TO GIVE EVERY CHILD, WHO HAS THE DESIRE, THE OPPORTUNITY TO PLAY THE GREAT GAME OF LACROSSE AND TO DEVELOP PLAYERS FOR THE HIGH SCHOOL TEAMS. AS WITH ANY YOUTH PROGRAM, TO ACCOMPLICH THIS GOAL WE WILL NEED VOLUNTEERS TO HELP COACH AND SUPPORT OUR TEAMS AT EVERY LEVEL EACH YEAR. WITHOUT ADDITIONAL VOLUNTEERS THERE IS A CHANCE WE WILL HAVE TO REQUIRE TRYOUTS, REDUCE THE SIZE OF THE TEAMS, OR NOT BE ABLE TO FIELD TEAMS OR HOLD CLINICS AT CERTAIN GRADE LEVELS.

PARENTAL WAIVER & CONSENT FORM / PERMISSIONS / AUTHORIZATIONS

I the undersigned am the parent or guardian of the above registrant and as such give permission for my child to participate in the Passaic Valley LAX Club program. I further make known that there are NO physical or health reasons which would prevent my child from participating completely within the Lacrosse **Program** (if there are reasons, please indicate below and if necessary, attach a doctor's note detailing allowable level of participation).

Parent Involvement This youth program is built on volunteerism. In order to keep per player costs low, we do require all families to volunteer in at least one area. This includes, but is not limited to: fund raising, apparel orders/distribution and event staff. If you would like your child to play, please be prepared to help.

I have read this entire registration form and agree to all the terms and conditions contained within.

DV CIONING	DEL	OW VOIL		THECE TERMS
BY SIGNING	BEL		AGREE 10	THESE TERMS.

Name of Parent/Guardian (PLEASE PRINT)	Signature of Parent/Guardian	Date	



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Passaic Valley LAX Club – CODE OF CONDUCT

Youth sports programs play an important role in promoting the physical, social and emotional development of children. It is therefore essential for parents, coaches and officials to encourage youth athletes to embrace the values of good sportsmanship. Moreover, adults involved in youth sports events should be models of good sportsmanship and should lead by example by demonstrating fairness, respect and self-control. As a prerequisite for participation, athletes, coaches and parents/guardians must sign this statement that commits them to follow these established rules. These forms must be signed at the beginning of each sport season even if an athlete plays more than one sport in a year.

I therefore pledge to be responsible for my words and actions while attending, coaching, officiating or participating in a youth sports event and shall conform my behavior to the following code of conduct:

- 1. I will not engage in unsportsmanlike conduct with any coach, parent, player, participant, official or any other attendee.
- 2. I will not encourage my child, or any other person, to engage in unsportsmanlike conduct with any coach, parent, player, participant, official or any other attendee.
- 3. I will not engage in any behavior which would endanger the health, safety or well-being of any coach, parent, player, participant, official or any other attendee.
- 4. I will not encourage my child, or any other person, to engage in any behavior which would endanger the health, safety or well-being of any coach, parent, player, participant, official or any other attendee.
- 5. I will not use drugs or alcohol while at a youth sports event and will not attend, coach, officiate or participate in a youth sports event while under the influence of drugs or alcohol.
- 6. I will not permit my child, or encourage any other person to use drugs or alcohol at a youth sports event and will not permit my child, or encourage any other person, to attend, coach, officiate or participate in a youth sports event while under the influence of drugs or alcohol.
- 7. I will not engage in the use of profanity.
- 8. I will not encourage my child, or any other person, to engage in the use of profanity.
- 9. I will treat any coach, parent, player, participant, official or any other attendee with respect regardless of race, creed, color, national origin, sex, sexual orientation or ability.
- 10. I will encourage my child to treat any coach, parent, player, participant, official or any other attendee with respect regardless of race, creed, color, national origin, sex, sexual orientation or ability.
- 11. I will not engage in verbal or physical threats or abuse aimed at any coach, parent, player, participant, official or any other attendee.
- 12. I will not encourage my child, or any other person, to engage in verbal or physical threats or abuse aimed at any coach, parent, player, participant, official or any other attendee.
- 13. I will not initiate a fight or scuffle with any coach, parent, player, participant, official or any other attendee.
- 14. I will not encourage my child, or any other person, to initiate a fight or scuffle with any coach, parent, player, participant, official or any other attendee.

I herby agree that if I fail to conform my conduct to the foregoing while attending, coaching, officiating or participating in a youth sports event I will be subject to disciplinary action, including but not limited to the following in any order or combination as determined by the Passaic Valley LAX Club Executive Board.

- 1. Verbal Warning.
- 2. Written warning.
- 3. Suspension or immediate ejection from a youth sports event.
- 4. Suspension from multiple youth sports events.
- 5. Season suspension or multiple season suspension.

Participants Name	Signature	Date
Parent / Guardian Name	Signature	Date
REGISTRATION AND RELEASE FORM:		
I, THE PARENT/GUARDIAN OF THE REGISTRANT, A MINO	R, AGREE THAT THE REGISTRANT AND I WILL ABIDE B	BY THE RULES OF THE
PASSAIC VALLEY LAX CLUB, ITS AFFILIATED ORGANIZAT	TIONS AND SPONSORS. RECONGNIZING THE POSSIBILITY	OF PHYSICAL INJURY
ASSOCIATED WITH ANY SPORT PROGRAM AND ACTIVI	TIES ("THE PROGRAMS"), I HEREBY RELEASE, DISCHA	RGE AND OTHERWISE
INDEMNIFY THE PASSAIC VALLEY LAX CLUB, ITS AFFILI	IATED ORGANIZATIONS AND SPONSORS, THEIR EMPLOY	EES AND ASSOCIATED
PERSONEL, INCLUDING THE OWNERS OF THE FIELDS AN	ND FACILITIES UTILZED BY THE PROGRAMS, AGAINST A	ANY CLAIM BY OR ON
BEHALF OF THE REGISTRANT AS A RESULT OF THE REGIS	STRANT'S PARTICIPATION IN THE PROGRAMS AND/OR BE	ING TRANSPORTED TO
OR FROM THE SAME, WHICH TRANSPORTATION I HEREBY A	AUTHORIZE.	
Parent / Guardian Name	Signature	Date