



## GIRLS LACROSSE CAMP

Day Camp  
MONDAY THROUGH FRIDAY  
**June 21–25, 2010**



**Athletic Department**  
One Winooski Park, Box 258  
Colchester, Vermont 05439

Non-Profit  
Organization  
U.S. POSTAGE  
**PAID**  
Burlington, VT  
05401  
Permit No. 154



### SAINT MICHAEL'S COLLEGE GIRLS LACROSSE CAMP HEALTH FORM

In case of emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

I understand our family will provide insurance coverage if our son/daughter is injured while participating in a Saint Michael's College Sports Camp.  
**Health Insurance:**

Company: \_\_\_\_\_

Policy #: \_\_\_\_\_

Family Doctor: \_\_\_\_\_

I hereby state that my son/daughter is in good health and may participate in the Saint Michael's College All Sports Camp. I also give permission to the attending health professional, in case of emergency, to allow my son/daughter to be treated in the hospital emergency room, if necessary.

Printed name of Parent/Guardian \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

Please list any special health problems or special circumstances:

# GENERAL INFORMATION

## CAMP DIRECTOR

Carla Hesler, Saint Michael's College Women's Lacrosse Head Coach; Former Head Women's Lacrosse at Colgate University, and Assistant Lacrosse coach at Yale University. Coach Hesler is a former two-sport athlete at University of University of New Hampshire, and is a member of their Athletic Hall of Fame.

## COACHING STAFF

Our staff will include Saint Michael's College coaches, and other college coaches and area high school coaches. Local college players will also serve as instructors.

## EQUIPMENT

All campers will provide their own shorts, shirts, swimsuit, towel, combination lock, water bottle, and sneakers/cleats. All campers must have two pairs of shoes—one pair to be worn for inside activities, and the other to be worn outside. Outdoor footwear and/or black-soled sneakers will not be permitted on indoor courts. In addition, each camper must provide their own eye guards lacrosse stick and a mouthguard. Goalkeepers must provide their own equipment.

## FORMS

- Complete the attached registration form. Incomplete forms will be returned.
- Complete the Statement of Health form on reverse side.

## MEDICAL/INSURANCE

An athletic trainer is on duty while camp is in session. Coverage by family or other health and accident insurance is required.

## MEALS

Lunch will be provided for our full-day campers in our campus dining facility and is included with the camp fee.

## FULL-DAY CAMPS

- Offered for girls entering grades 5-10.
- Monday through Friday, 9:00 a.m. to 3:30 p.m.
- Opportunity to use swimming pool.

# CAMP INFORMATION

## OBJECTIVE

To create a positive and encouraging environment that will enable players to learn about the exciting and challenging game of lacrosse. Training sessions will focus on individual skill development and will provide athletes with a variety of team tactics. Campers will be assigned to a level based on age and experience.

## FEES

- Day Camp: \$225.00 per week (5 full days and includes lunch).
- Make checks payable to Saint Michael's College.
- Fee includes meal, camp t-shirt and awards.

## DEPOSIT/CANCELLATION/ REFUNDS

A \$100 deposit per camp is required and should accompany your application. \$25 of the total deposit is non-refundable. The balance is refundable up to one month prior to the start of camp. No refunds will be given to campers who voluntarily leave camp or who are sent home for disciplinary reasons.

Your canceled check confirms your enrollment in the camp that you chose.

Please note: incomplete applications will be returned and processing delayed.

Any registration received/postmarked after the deadline date will need to add an additional \$25.00. This will also apply to any walk-ins the day of camp registration.

## REGISTRATION

Tarrant Recreation Center at 8:30 a.m., first day of camp.

## DATES & TIMES

Monday, June 21 to Friday, June 25, 2010, 9:00 a.m.–3:30 p.m.

## FOR FURTHER INFORMATION, PLEASE CONTACT:

Carla Hesler, Camp Director  
Athletic Department, Saint Michael's College  
One Winooski Park, Box 258, Colchester, Vermont 05439  
802.654.2634 • chesler@smcvt.edu  
[www.smcvt.edu/athleticcamps](http://www.smcvt.edu/athleticcamps)



## SAINT MICHAEL'S COLLEGE GIRLS LACROSSE CAMP APPLICATION

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home phone: \_\_\_\_\_ T-Shirt Size (circle one): \_\_\_\_\_ Child: L \_\_\_\_\_ Adult: S M L \_\_\_\_\_  
Grade entering in fall: \_\_\_\_\_ School: \_\_\_\_\_ Age (at time of camp): \_\_\_\_\_  
Name of parent/guardian: \_\_\_\_\_ Parent's day/work phone: \_\_\_\_\_  
E-mail for confirmation: \_\_\_\_\_

\_\_\_\_ Day camp (\$225) / June 21–25, 2010 (Application due June 7, 2010)

**Signature of parent/guardian:** \_\_\_\_\_  
*Any registration received/postmarked after the deadline date will need to add an additional \$25.00. This will also apply to any walk-ins the day of camp registration.*

Please make checks payable to Saint Michael's College and return to:  
Saint Michael's College Summer Camps, Athletic Department, One Winooski Park, Box 258, Colchester, VT 05439

Office Only: Date Rec'd: \_\_\_\_\_ Amount Pd: \_\_\_\_\_ Check #: \_\_\_\_\_ Amount Due: \_\_\_\_\_ Initials: \_\_\_\_\_

**A deposit of \$100 is required for EACH WEEK OF CAMP your child will be attending. The balance of camp fees paid upon registration. Please complete statement of health form on other side. \$25/camp is non-refundable.**

**Please indicate the session desired for camp:**