



**Girls Lacrosse Schools
Confirmation Packet**

Dates: July 9-July 12 2012
Massachusetts Youth School

Amount Paid: _____

Classification: _____

Balance Due: _____

Date Balance Due: June 25th, 2012

Dear Players,

We are very excited that you will join us for a great week of lacrosse with Amonte Sports. We hope that this week will be a memorable and exciting experience for you!

Note that you have signed up for:

The Amonte Sports Massachusetts Youth School July 9-July 12, 2012 at Middlesex School.

*School will be from 9:00 AM - 3:00 PM each day, except the last day which will be from 9:00am-12:00pm

****Lunch will be from 12:00—1:00 PM. Lunch will not be provided; please bring your own lunch!***

Please **read through the attached packet** carefully, as you will find all the information needed. You can also access this information at www.amontesports.com.

All participants must submit a signed health & release authorization AND a copy of their most recent physical & immunization records no later than June 25th, 2012.

Please note: Online registrants have already completed the health & release authorization electronically, but still need to submit physical and immunization records. Offline registrants must submit both.

Please mail paperwork to the address below, or submit via fax to 847.563.8678.

Amonte Sports
1822 Ridge Ave. Suite 185
Evanston, IL 60201

Players should report for registration between 8:00am-9:00am Monday, July 9, 2012.

School Ends @ 12:00pm, July 12, 2012.

With our impressive staff and unique teaching philosophy, we hope that you will have a competitive fun filled week. Enjoy the beginning of the summer and we will see you on July 9, 2012.

Sincerely,

Kelly Amonte Hiller
Amonte Sports, LLC.

Amonte Sports Contact Information
1822 Ridge Ave. Suite 185
Evanston IL 60201
Phone: (1-877-Y-AMONTE) Fax: (1-847-563-8678)
Email: bschierer@womenslax.com

Thank you for registering for the 2012 Amonte Sports Lacrosse School at Middlesex. Players should report on July 9, 2012.

We hope that this will be a memorable and exciting experience for you to work with some of the top players and coaches from across the country! The information in this packet is VERY IMPORTANT, so please read it thoroughly and feel free to call us with any questions at our toll free number: 1-877-Y-AMONTE (1-877-926-6683) or e-mail us at bschierer@womenslax.com

Registration Times & Location

8:00am on the 9th of July at Middlesex School at the Field House (Landry Center). Exact directions will be sent prior to July 9th and signs will be posted on campus for location of registration. See the attached map for directions

Players are to bring a packed lunch for the duration of the week

Medical Paperwork

In order to attend— participants MUST submit a Health & Release Authorization waiver AND their recent Physical and Immunization records.

***Online registrants** have already completed the Health & Release Authorization waiver when registering online— BUT still need to submit Physical and Immunization records.

***Offline registrants** need to submit both the Health & Release Authorization AND their recent physical and Immunization records. Please see page 5 of this packet.

**** These forms must be received before June 25th, 2012****

Please either fax forms to: 847.563.8678

or mail them to: Amonte Sports

**PO 1822 Ridge Ave. Suite 185
Evanston, IL, 60201**

Contact Phone

1-877-Y-AMONTE.

If there is no answer to your call, please leave a message on the machine and an Amonte Sports representative will return your call or relay the message to your daughter.

Spending Money

There will be a store for players to purchase drinks and 2012 Amonte Sports lacrosse apparel/merchandise. There will be a bank to give players the option to store money for the duration of the week.

School Ends

School ends July 12th at 12:00pm. All sessions, including the final day will include intensive instruction to help the youth player improve their skill level.

Health and Safety

There will be a certified trainer working at the school, available to attend to players' needs at all times during the week. Drugs, alcoholic beverages, and cigarettes are strictly forbidden and constitute along with general misconduct, grounds for immediate dismissal without refund or credit.

Amonte Sports Contact Information

Amonte Sports 1822 Ridge Ave. Suite 185 Evanston IL 60201
Phone: (1-877-Y-AMONTE) Fax: (1-847-563-8678)
Email: agersuk@womenslax.com

Payments

Full payment of fees must be received by Amonte Sports by **June 25, 2012**. If you signed up online, your remaining balance due will be automatically charged to your credit card on Monday, June 25th, 2012, two weeks prior to the start of school.

Checklist of Things To Bring

LUNCH!	Sneakers	For Goalies:
T-shirts	Lacrosse Stick	Goalie Equipment
Shorts	Mouth Guard	Goalie Stick
Sweat Shirt	Water Bottle	Goalie Helmet
Sweat Pants	Sunscreen	
Sports Bras	Insect Repellent	
Cleats	Spending Money	
Athletic Socks	Gloves (optional)	
	Goggles	

Cancellation Policy

Amonte Sports Cancellation Insurance:

For an additional \$35, cancellation insurance can be added to your registration. Our cancellation insurance entitles you to a full cash refund of all school fees paid to Amonte Sports at the time of cancellation. Note that the \$35 cancellation insurance is non-refundable. To receive a full cash refund, you must email Blake Schierer (bschierer@womenslax.com) prior to the start of school. Cancellation insurance must be purchased upon initial registration/deposit, and cannot be added retroactively. Refunds will be processed by 9/30/12.

Amonte Sports General Cancellation Policy:

If you cancel from school for any reason you will be charged a \$50 administration fee. You will receive a credit voucher for all monies paid to Amonte Sports, less the \$50 administration fee. The credit voucher is valid towards any Amonte Sports school/clinic through 2013 and is transferrable to any family member. Cancellations must be made in writing via email to bschierer@womenslax.com Cash refunds will only be issued with the purchase of Amonte Sports cancellation insurance upon initial registration.

Massachusetts Youth School

Daily Schedule:

(Schedule is subject to vary based on logistics of the week)

Monday, July 9, 2012

Check in @ Middlesex School	8:00am-9:00am
Warm up	9:00am- 9:15am
Demo	9:15am- 9:45am
Skills Session 1	9:45am-12:00pm
Lunch	12:00-1:00pm
Demo	1:00-1:15pm
Skills Session 2	1:15-3:00pm
Checkout and Departure	3:00pm

Tuesday, July 10, 2012

Check in	9:00am-9:15am
Warm up	9:15am-9:45am
Stickwork/Demos	9:45am-10:15am
Skills Session 1	10:15am-12:00pm
Lunch	12:00-1:00pm
Demo	1:00-1:15pm
Skills Session 2	1:15-3:00pm
Checkout and Departure	3:00pm

Wednesday, July 11, 2012

Check in	9:00am-9:15am
Warm up	9:15am-9:45am
Stickwork/Demos	9:45am-10:15am
Skills Session 1	10:15am-12:00pm
Lunch	12:00-1:00pm
Demo	1:00-1:15pm
Skills Session 2	1:15-3:00pm
Checkout and Departure	3:00pm

Thursday, July 12, 2012

Check in	9:00am-9:15am
Warm up	9:15am-9:45am
Stickwork/Demos	9:45am-10:15am
Closing Day Games	10:15am-12:00pm
Check out and Departure	12:00pm

Directions to Middlesex School

Middlesex School is located at 1400 Lowell Rd., Concord, Massachusetts 01742.

From Boston:

Massachusetts Turnpike (Route 90 west to 128/95 north to Exit 29B on to Route 2 west (Acton/Fitchburg) to second stop light; straight through light and follow sign to Concord Center; proceed straight to the Colonial Inn; take quick left and then quick right around Inn into Lowell Road; school gate approximately 2.7 miles on right.

From T.F. Green Airport in Providence, RI :

When exiting the airport follow signs for Route 95 North. Proceed on Route 95 north to Route 2 west to Exit 29B; continue with directions above.

From New York and West:

Massachusetts Turnpike (Route 90) east to Route 290 northeast to 495 north to Route 2; Route 2 east to rotary; third exit off rotary (Carlisle) onto Barrett's Mill Road and follow to blinking red light (Lowell Road); left on Lowell Road; school gate is approximately 1 mile on right.

Driving Distances:

Concord Center to Middlesex: 3 miles

Boston to Concord: 19 miles

Providence to Boston: 46 miles

New York to Boston: 204 miles

Hartford to Boston: 98 miles

Philadelphia to Boston: 300 miles

Route 495 to Middlesex: approximately 10 miles

Health & Release Authorization Waiver

**** FOR OFFLINE REGISTRANTS ONLY****

I agree, warrant and covenant as follows:

Release for Medical Treatment: "I, the parent of the named Camp/School/Clinic/Tournament/Club Team participant, give permission for my child to receive emergency medical or surgical treatment and hospitalization if necessary. I understand that every attempt will be made to contact me, or the Emergency contact recorded, before taking action. I hereby waive and release the Amonte Sports LLC Staff, Camp/School/Clinic/Tournament/Club Team Management, host facility, and Sponsors/Contracted Affiliates from any liability for any injury or illness sustained while at camp/school/practice/play. I UNDERSTAND THAT THERE IS A RISK OF INJURY TO MY CHILD AS A RESULT OF CAMP/SCHOOL/CLINIC/TOURNAMENT/CLUB ACTIVITIES, AND KNOWINGLY AND VOLUNTARILY ASSUME ALL RISK OF SUCH INJURY. I will be financially responsible for any medical attention needed during camp/school/clinic/tournament/club practice or resulting from any injury received at camp/school/clinic/tournament/club practice. My medical insurance shall be the insurance coverage for any medical treatment."

Physical Certification: "I hereby certify that the named Camp/School/Clinic/Tournament/Club participant is physically able to participate in the Amonte Sports LLC Camp/School/Clinic/Tournament/Practice and that I know of no restrictions, physical impairments, or any other facts, which in any manner limit his/her participation in such a program."

Publicity Release: "I understand that Amonte Sports LLC retains the right to use for publicity and advertising purposes, photographs of participants taken during camps/schools/clinics/tournaments/club practices."

By accepting this Event Waiver, you are electronically signing to the Amonte Sports LLC Camp/School/Clinic/Tournament/Club Health and Release Authorization.

Participant Name: _____

Event: _____

Parent/Guardian Signature: _____ Date: _____

Medical Insurance Information:

Carrier Name: _____ Policy Number: _____

Policy Holder Name: _____ Policy Holder Date of Birth: _____