



Friendswood Mustangs Boys Lacrosse Camp

June 15th-17th

8:30am-11:30am

All-Star Game Thursday, June 17th at 7pm

**This instructional Camp will be taught by The Head Varsity
Coach Steve Kirk & Friendswood Lacrosse Varsity Players**

Location: Centennial Park

2200 S. Friendswood Dr

Open To All Players: 3rd grade-6th grade

Camp Contact: Coach Steve Kirk skirk@fisd12.net

(Mobile) 832.425.7871

Camp Cost-\$75.00

Make Checks Payable to: FMBC-Lacrosse Camps

P. O. Box 505, Friendswood, Texas 77546

Register Early As Openings Will Fill Up Quickly.

Friendswood Mustangs Boys Lacrosse Camp

Child's Name _____ *Child's Age* _____

Child Shirt Size _____

Grade for 2010-2011 School Year _____

Parent's Names _____

Parents Email _____

Street Address _____ *City* _____ *Zip* _____

Contact #'s _____

Medical Insurance Company & Policy Number _____

Name of your School _____

We (or I) hereby request that you accept the application for enrollment of _____ in the Friendswood Mustang Lacrosse Camp on the dates set forth in this application, and in consideration of our acceptance of this application, we (or I) hereby release the Friendswood Lacrosse Camp and all its employees and agents from all claims on account of any injuries which may be sustained by our (or my) child while attending the Friendswood Lacrosse Camp, and its employees and agents for any claim which may be hereafter presented by our (or my) child. As well, I authorize the camp personnel to act for me in any emergency requiring medical attention. I understand I am responsible for all hospital, laboratory, and doctor's fees. We (or I) know of no mental or physical problems which may affect our (or my) child's ability to safely participate in this camp. I further certify that the above mentioned participant has medical insurance in case of an emergency.

Parents Signature _____

Date _____

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