

# Girls Lacrosse Intro Camp Grades 4-12 (2024-2025 school year)

Monday, Tuesday, Wednesday 5:30-7pm

July: 8 ,9, 10, 15, 16, 17

@Chippewa Valley stadium (outdoors)

\$100 per participant

No equipment necessary, we can provide sticks & goggles for up to 16 girls. Current clinic limit is 16 girls unless athletes bring their own equipment (BOTH goggles and stick) to ensure there is enough equipment to supply to all participants. Participants do not have to attend Chippewa Valley Schools to attend.

**Director:** Chrissy Haller **email:** [challer@cvs.k12.mi.us](mailto:challer@cvs.k12.mi.us)

Work with the Chippewa United Varsity girl's lacrosse coach, Dakota and Chippewa alumni players, and current varsity players over the course of 6 practices. Learn how-to pick-up ground balls, catch, throw, and shoot. Lacrosse is growing in Macomb, be a part of the sport! Get started at our intro camp, it's never too late to learn!

Make sure to bring water, and wear sunscreen.

REGISTRATION ENDS Monday JULY 8TH, 2024. Register online at: <http://onlinereg.cvs.k12.mi.us>

Or in person to: Chippewa Valley Schools, Adults & Community Ed 19120 Cass Ave, Clinton Twp MI 48038 or Little Turtle: 50375 Card Rd, Macomb MI 48044. Cash, check (checks made out to *Chippewa Valley Schools*), VISA, Mastercard are all acceptable payment methods. \$20.00 fee on returned checks. All withdrawals are subject to an \$8.00 processing fee. Full refund through 7/10/2022. No refunds will be given after 7/10/2022. Payment is due in full at time of registration. **Coaches cannot accept registration payments.**

Return this stub with payment

**\$100**

Return this stub with payment

## Chippewa United Girls Lacrosse Camp 5:30pm-7:00pm July: 8, 9, 10, 15, 16, 17, 18

Participants name: \_\_\_\_\_ D.O.B.: \_\_\_/\_\_\_/\_\_\_ 2024-2025 grade: \_\_\_

Parent name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Email: \_\_\_\_\_ Student's school: \_\_\_\_\_

Address: \_\_\_\_\_ city: \_\_\_\_\_ Zip \_\_\_\_\_

Method of payment: cash      check# \_\_\_\_\_      credit

VISA/master card#: \_\_\_\_\_ exp. Date: \_\_\_/\_\_\_

Name of card holder: \_\_\_\_\_ signature: \_\_\_\_\_

Will you be bringing your own lacrosse stick?      Yes      no

Will you be bringing your own lacrosse goggles?      Yes      no