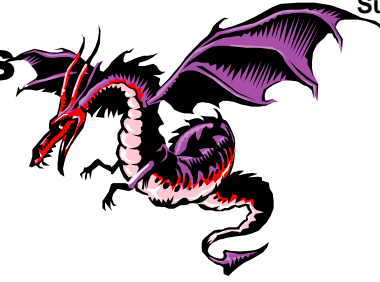


Dragons Boys Lacrosse Camps



Little Dragons

Boys Grades 3-5, in fall 2009

July 13 - 16, Monday - Thursday

9:30 a.m. - 11:30 a.m. held at the Brunswick High School

Fee: \$33 Res. \$44 Non Res.

This camp is a non-contact introductory level camp. Participants will be introduced to many of the basic fundamentals of boys' lacrosse. This non-contact session will emphasize the development of how to throw and catch, proper ground ball techniques, as well as many other introductory level fundamentals of the sport of lacrosse.

Equipment Needed: Stick, mouth piece, and appropriate footwear. A limited number of sticks are available to be lent out on a first come/first serve basis and need to be reserved ahead of time at registration.



Big Dragons

Boys Grades 6-8, in fall 2009

July 13 - 16, Monday - Thursday

1:00p.m. – 3:30 p.m. held at the Brunswick High School

Fee: \$38 Res. \$50 Non Res.

This camp is a full contact / full equipment camp. Participants will practice many of the basic fundamentals of boys' lacrosse. This full contact / full equipment camp will emphasize how to throw and catch, proper ground ball techniques, as well as many other upper level fundamentals of the sport of lacrosse.

Equipment Needed: Helmet, shoulder pads, arm pads, gloves, stick, mouth piece, and appropriate footwear.

Don Glover, Brunswick High School Boys Varsity Lacrosse Coach, will direct both of the camps.

For more information call 725-6656. Visit us online at www.brunswickme.org/parkrec

The Parks and Recreation Department encourages individuals with disabilities to register for this program. Should you desire further information, contact the Recreation Department at 725-6656.

✂ **Detach & return with fee to the Recreation Center, 30 Federal St., by July 7.** Office hours Mon.-Fri., 8:00 a.m. to 4:30 p.m. ✂

Brunswick Parks & Recreation Dept. FEE: **Little Dragons: \$33 Res. / \$44 Non Res.**

Boys Lacrosse Camp

Big Dragons: \$38 Res. / \$50 Non Res.

I will borrow a lacrosse stick

Office Use Only

Date: _____

Amt\$: _____

Rec.#: _____

Computer

Please Print

NAME _____

STREET ADDRESS _____

TOWN _____ ZIP _____

TOWN OF RESIDENCE _____ SCHOOL _____ GRADE, fall 2009 _____

HOME PHONE _____ WORK PHONE _____

AGE _____ DATE OF BIRTH _____

CELL/PAGER _____ EMAIL _____

EMERGENCY PERSON (other than parent): _____ RELATIONSHIP _____

DAY PHONE _____ CELL/PAGER _____

*ALLERGIES/PHYSICAL or EMOTIONAL LIMITATIONS _____

**WOULD YOU LIKE TO BE CONTACTED BY OUR THERAPEUTIC RECREATION COORDINATOR REGARDING THE ABOVE?* YES NO

Please check (✓) appropriate session:

Little Dragons, grade 3-5 (fall 09) (121276-01) 9:30am - 11:30am; **Big Dragons, grade 6-8 (fall 09)** (121276-02) 1:00pm - 3:30pm

I give permission for my, above named, child to participate in the Dragons Boys Lacrosse camp.

Signature of Parent/Guardian _____ Date _____

PARENT/GUARDIAN NAME(S) *Please Print* _____