

Name _____ Age _____ D.O.B. _____
 Address (street, apt, PO box) _____
 Town/City _____ State _____ Zip _____
 Telephone _____ T-Shirt/Sweatshirt Size _____
 School _____ Position _____ Exp (yrs) _____
 Year of graduation _____ E-mail: _____
 Division (check one): RED (ages 13-15) _____ WHITE (ages 16-18) _____

Check the camps you are registering for:

| | | |
|---|-----------------------|-----------------|
| Paul Rabil Pro Offense Camp - July 25-28 | ___ Overnight - \$625 | ___ Day - \$495 |
| Brodie Merrill Pro Defense Camp - July 25-28 | ___ Overnight - \$625 | ___ Day - \$495 |
| Brett Queener Pro Goalie Camp - July 25-28 | ___ Overnight - \$625 | ___ Day - \$495 |
| Chris Surran Video Goalie Camp - July 28-31 | ___ Overnight - \$625 | ___ Day - \$495 |
| Kyle Hartzell One-On-One Defense & Transition Camp - July 28-31 | ___ Overnight - \$625 | ___ Day - \$495 |
| Kimmel & Boyle Dodging & Shooting Camp - July 28-31 | ___ Overnight - \$625 | ___ Day - \$495 |
| Brendan Mundorf Extreme Attack Camp - July 31-Aug 3 | ___ Overnight - \$625 | ___ Day - \$495 |
| Matt Abbott Extreme Midfield Camp - July 31-Aug 3 | ___ Overnight - \$625 | ___ Day - \$495 |
| Doc Schneider Extreme Goalie Camp - July 31-Aug 3 | ___ Overnight - \$625 | ___ Day - \$495 |
| Ryan McClay Extreme Defense Camp - July 31-Aug 3 | ___ Overnight - \$625 | ___ Day - \$495 |
| Full-Field Team & Skills Lacrosse Camp - Aug 3-6 | ___ Overnight - \$625 | ___ Day - \$495 |
| Kip Turner Full-Field Goalie Camp - Aug Aug 3-6 | ___ Overnight - \$625 | ___ Day - \$495 |
| Dave Evans Power Shooting & Strength Camp - Aug 3-6 | ___ Overnight - \$625 | ___ Day - \$495 |
| Matt Poskay Run & Gun Middie Camp - Aug 3-6 | ___ Overnight - \$625 | ___ Day - \$495 |
| U-11 - Aug 3-6 | ___ Overnight - \$625 | ___ Day - \$495 |

If you are registering for more than one Player's Choice camp, deduct \$50 for each **additional** camp (check here) _____

If you are registering with 2 or more friends, teammates, or family members (**A GROUP OF AT LEAST THREE**), and are claiming the group discount of \$50, check here _____ (only one discount per camp)

★ **(IMPORTANT NOTE: ALL DISCOUNT GROUP REGISTRATIONS MUST COME IN THE SAME ENVELOPE, OR MUST REGISTER OVER THE PHONE AT THE SAME TIME, OR ONLINE AT THE SAME TIME.)** ★

Sweatshirt: To receive a grey **Player's Choice Hooded Sweatshirt**, check here and include \$35 with deposit payment: _____ (check size: ___ S ___ M ___ L ___ XL ___ XXL)

UnderArmour: To receive a black **Player's Choice U/A Compression Tee**, check here and include \$30 with deposit payment: _____ (check size: ___ S ___ M ___ L ___ XL ___ XXL)

Inside Lacrosse Magazine:

- ___ Yes, I'd like a 1-year subscription to Inside Lacrosse Mag for \$17.95 (50% off cover price)
- ___ Yes, I'd like a 1-year extension to my **current** subscription to Inside Lacrosse Mag for \$17.95 (50% off cover price)

Round-Trip Travel Options for UMass Dartmouth (circle one):

TF Green Airport (\$65) • Providence Bus Station (\$65) • Providence Train (\$65)
 New Bedford Airport (\$30) • New Bedford Bus (\$30) • New Bedford Ferry (\$30) • Logan Airport (\$100)

Amount of payment enclosed (please include travel fee with registration): \$ _____

Mastercard / VISA / American Express

Name _____ Account # _____

Expiration Date _____ Signature _____

Billing Address (if different from home address) _____

Office Use: _____

I am aware that the above applicant has applied for, and has my permission to attend, the Player's Choice Lacrosse Camp(s) checked above, being held at the University of Massachusetts at Dartmouth, MA in the summer of 2011. Enclosed is a deposit of \$175 for each camp, or full payment, and I realize that all payments are final unless cancellation is due to a health related emergency, in which case a refund, less deposit, may be processed, with a note from a medical doctor. There are no refunds after June 30, 2011. Final balance for all camps is due May 31, 2011. **All deposits are non-refundable.**

Signature of parent or guardian _____

Date _____ Print Name _____

Relation to applicant _____

Later in the spring you will receive additional important information, including a medical form which must be filled out prior to the start of camp, directions to the college, and a What-To-Bring-List.

Roommate request (list only one) _____

Register online or by phone with MasterCard, VISA, or American Express.

To register online, visit our website at www.pclax.com.

UMass Dartmouth is not responsible for the operation of camps.

**Telephone:
508-831-1200
Toll Free
1-800-224-5785**

PLAYER'S CHOICE BOY'S LACROSSE CAMPS

**Mail payment and registration to:
Player's Choice, P.O. Box 200 • Northborough, MA 01532**



