



RENEGADES LACROSSE

P.O. Box 144, Croton Falls, NY 10519 914.720.6832

**NORTH SALEM RECREATION DEPARTMENT
&
RENEGADES LACROSSE**

FALL 2007 BOYS LACROSSE LEAGUE 6-8th grade, 9-10th grade

DATES: Sundays, September 16th thru October 14th

TIME: 6-8th gr. 9:00 - 10:15am
9-10th gr. 10:30 - 11:45am

LOCATION: Purdy's Field
Purdys, NY (Exit 7 684 North Bound/ Rts. 116 & 22)

COST: \$80 per participant
Make check payable to: **North Salem Recreation Department**

MAIL TO: Renegade Lacrosse, Inc. PO Box 144, Croton Falls, NTY 10519

For further information contact bcurran7@optonline.net

NAME _____

POSITION _____ GRADE _____ T-SHIRT SIZE _____

ADDRESS _____

TEL# _____ CELL# _____

US LACROSSE # _____

E-MAIL _____ @ _____

LIST ANY MEDICAL PROBLEMS ON BACK OF FORM

PARENT/GUARDIAN SIGNATURE _____

All participate at their own risk. The town of North Salem does not carry insurance to cover hospitalization or medical costs of persons injured while participating in any recreational programs. I understand that my child's participation is dependent on his/her behavior and obedience to the coach.

I hereby release the Town of North Salem, its officials, officers, employees and volunteers of any and all liability whatsoever in connection with any damages and/or injuries that I or any member of my family may sustain as a result of participating in the programs of the North Salem Recreation Department.