

2012 Army Lacrosse Camp JULY 7-10 – JULY 11-14
United States Military Academy, West Point, NY
Joe Alberici – Director – Shirley Lewis Camp Coordinator

ABOUT THE CAMP

The West Point Lacrosse Camp will provide a well-rounded, concentrated session of clinical instruction tailored for both the experienced and inexperienced player. With an emphasis on individual instruction and a staff to camper ratio of 8-1, the daily schedule will include fundamentals during the morning session, fundamentals and games during the afternoon and games again in the evening session. Due to barracks space availability, **APPLY EARLY SO YOU DON'T GET CLOSED OUT!**

CAMP FACILITIES

Will provide young men the opportunity to experience the Cadet atmosphere during their stay at the Academy. They will be housed in USMA housing (COTS & BEDS will be issued) No camper under 12 allowed in top bunk – Regulations!

Please note, overnight stay between Combo Sessions is offered strictly as an accommodation and will have not have any additional lacrosse sessions w/limited staff and activity. Camper will not be allowed to leave campus unless written permission from parent and verbal contact with office.

COST & PAYMENT

\$560 FULL / \$495 DAY / \$535 TEAM RATE/FAMILY RATE/ OR COMBO SESSION (Each Session) - MILITARY (ACTIVE ONLY) \$500 FULL or DAY

Family Rate require s2 or more - Military requires parent currently Active - Covers all meals (lunch & dinner for day campers), lodging, instruction, and the use of training facilities during the camp.

TEAM DISCOUNTS MUST BE APPLIED PRIOR TO REGISTRATION(MUST REGISTER TOGETHER) – NONE WILL BE GIVEN ON OR AFTER REGISTRATION

\$300 DEPOSIT due with application (non-refundable deposit).

No registrations accepted without deposits – Combo session requires deposit for each session !

REMAINING BALANCE must be pre-paid three weeks prior to camp registration along with health and waiver forms - NO REFUNDS will be made after the applicant has been accepted. All applications are handled on a first come, first served basis due to limited space. No Exceptions.

Please make all checks payable to: **Army Athletic Association**

Mail Check and Application to: **Army Athletic Association, BLDG 639, West Point, NY 10996**

OTHER FEATURES

A trainer will be present at all times. Age grouping for maximum learning environment: three groups: ages 9-11, 12-14 and 14-17 depending on registration numbers. Experienced, skilled players will be grouped together for advanced coaching. 10 field sessions.

The West Point Lacrosse Camp is designed for both experienced players and those who have no competitive experience. Beginners welcome. Young men ages 9-18 are eligible to attend camp. Current year graduates may be accepted. For further information call (845) 938-2429

GENERAL INFORMATION

1. Each camper must bring his own stick, helmet, gloves, pads, shoes (for grass field), shirts, athletic supporter, mouthpiece and bathing suit. In addition, one set of single sheets, pillow, pillowcase, or sleeping bag, towels and soap, toothbrush, toothpaste, etc., should be included in the list of items a camper must bring to the U.S. Military Academy. A fan will be desirable. Be sure to tag all luggage with your name. All luggage will be searched for contraband materials using airport security policy. All Campers are responsible for their luggage at Check Out.
2. Camper registration is from 8:30 AM to 11:00 AM on Saturday, 7 July and 8:30 AM TO 12:00 PM Wednesday, 11 July. Camp will conclude immediately after the afternoon sessions on Tuesday, 10 July and Saturday, 14 July following awards ceremonies.
3. All students enrolled will be required to attend all sessions and comply with all rules and regulations governing conduct. Any violations or abuse of the rules and regulations will result in immediate dismissal without refund. SNEAKERS are needed for use on Astro Turf field. All campers are responsible for their luggage and items at check in and check out.
4. Upon receipt of the required deposit and application, each camper will receive a letter with specific instructions and directions to the registration site.
5. Medical support is provided by Keller Army Hospital.

TRANSPORTATION

West Point is located off Route 9W, 40 miles north of the George Washington Bridge via the Palisades Parkway. It is the responsibility of each camper to get his own transportation to and from camp. We cannot provide airport/train or bus pickup.

Your need for spending money will be limited. A snack bar will be open during camp to buy refreshments and camp souvenirs. Stores will operate on **cash only** basis. **Do not bring more than you need. The barracks rooms do not lock.**

CAMP REGISTRATION APPLICATION FORM:

Please print out and complete in its entirety – type or print legibly, and return to:

West Point Lacrosse Camp
639 Howard Road
West Point, NY 10996

Forms may be duplicated for more than one registration.

2012 WEST POINT LACROSSE CAMP
REGISTRATION FORM

FULL	___	DAY	___	TEAM	___
FAMILY	___	COMBO	___		
MIL. (Active)	FULL	___	DAY	___	
SESSION 1		7-10 JULY		___	
SESSION 2		11-14 JULY		___	

Mail Application to:
Army Lacrosse Camp
639 Howard Road
West Point, NY 10996
Fax to: 845-938-4487

Please complete form in its entirety – we need all the info to place on teams/groups.

Please Enroll: _____
Last Name First Name Middle Initial

Home Address: _____
Street & Number City State Zip

Home Telephone _____ **Age** _____ **Date of Birth** _____ **Height** _____ **Weight** _____
Area Code During Camp

Former West Point Lacrosse Camper? Yes NO **Number of years playing Lacrosse**

School _____ **Grade Completed as of June '12** _____

POSITION (You must sign up for one position): ATTACK MIDFIELD DEFENSE GOALIE

*** 14 YEAR OLDS - PLEASE CHECK GROUP PREFERENCE** 14 & Over 14 & Under

If you desire a particular Roommate please indicate (Limit 3, NO CHANGES)
1. _____ 2. _____ 3. _____

HS TEAM NAME: _____ **TEAM RATE: \$535 (4 OR MORE PLAYERS)**
Team Rate Must Be Applied Prior To Registration - No changes after Registration

Parent or Guardian Signature _____ **Date** _____ **EMAIL** _____

Please return completed application and non-refundable **deposit of \$300**. (Deposit for each combo session also) Balance must be pre-paid 3 weeks prior to registration. Make checks payable to: **ARMY ATHLETIC ASSOCIATION**

CREDIT CARD INFORMATION: (IF YOU WOULD LIKE TO CHARGE THE APPLICATION)
Please be sure the Credit Card is up to date – there will be a charge for declined payments!

CREDIT CARD: (VISA, MC, ETC.): No Discover Cards

CREDIT CARD NUMBER: _____ **EXPIRATION DATE:** _____

NAME ON CREDIT CARD: _____

AMOUNT TO BE CHARGED: _____ **(Active Only)**
DEPOSIT \$300 () **FULL \$560** () **DAY \$495** () **TEAM \$535** () **FAMILY \$535** () **COMBO \$1070** () **MIL \$500** ()
(\$600 for Combo) (Overnight) (ALL) (Overnight) (Overnight) (Both Sessions) (Overnight)

SIGNATURE: (_____) **DATE:** _____

PLEASE PRINT YOUR FULL NAME HERE _____

OFFICE ONLY Completed by: _____ Per Tel/Con _____	RECEIVED VIA FAX:
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