

# 2013 DSU WOMEN'S LACROSSE WINTER CAMP REGISTRATION FORM

Name\_\_\_\_\_Age\_\_\_\_\_Grade\_\_\_\_\_

Home Address\_\_\_\_\_Phone\_\_\_\_\_

\_\_\_\_\_T-Shirt Size\_\_\_\_\_

Email\_\_\_\_\_Position\_\_\_\_\_

High School\_\_\_\_\_

## Emergency Contact Information

Parent/Guardian Name(s)\_\_\_\_\_

Phone\_\_\_\_\_Email\_\_\_\_\_

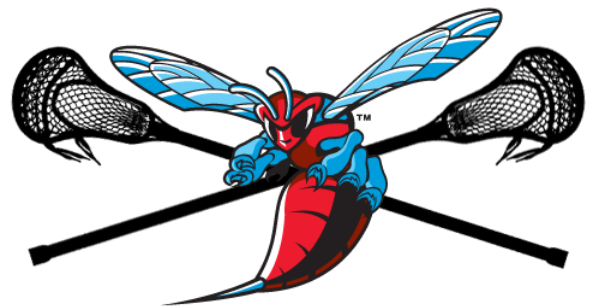
*Please make checks payable to: DSU Women's Lacrosse*

Registration Form + \$50 Fee + Waiver Enclosed

\_\_\_\_\_YES \_\_\_\_\_NO

Mail Registration, Check and Waiver to:

Delaware State University Lacrosse  
c/o Jillian Lontz  
1200 N. Dupont Hwy.  
Dover, DE 19901



***REGISTRATION, FEE AND WAIVER MUST  
BE RECEIVED BY JANUARY 11, 2013***