



# Howell Pride Lacrosse Club

For additional information and online registration  
go to [www.howellpridelax.com](http://www.howellpridelax.com)



## 2018 Spring Youth Lacrosse Registration Form

Program Dates: March 2018 – June 2018

Registration Deadline: March 18th, 2018

Participants name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Email (mandatory): \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

DOB: \_\_\_\_\_ Current Grade: \_\_\_\_\_ US Lacrosse # (if applicable): \_\_\_\_\_

**Emergency Contact Info. (If not same as above):** Relation: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Registration Fees include - field maintenance, referee fees, tournament fees, and membership in US Lacrosse

All players are responsible for purchase of their required equipment. **Cost if registering by March 1, 2018 (after March 1, 2018 add \$25 for each individual late registration)**

Age Group	Cost with Uniform	Cost without Uniform
Boys 1 <sup>st</sup> – 2 <sup>nd</sup> grade	\$75.00 (note: uniform does not include shorts)	N/A
Boys 3 <sup>rd</sup> – 4 <sup>th</sup> grade	\$175.00	\$125.00
Boys 5 <sup>th</sup> – 8 <sup>th</sup> grade	\$225.00	\$175.00
Girls 1 <sup>st</sup> – 4 <sup>th</sup> grade	\$160.00 (note: uniform does not include shorts)	\$125.00
Girls 5 <sup>th</sup> – 8 <sup>th</sup> grade	\$225.00	\$175.00

\*\*\*\* There is a \$25.00 discount for each additional sibling registered at the same time \*\*\*\*

**Uniform Size (please circle a size for Jersey and a size for Shorts)**

**Jersey Youth M L Adult S M L XL Shorts Youth M L Adult S M L XL**

X \_\_\_\_\_

X \_\_\_\_\_

Signature of Parent/Guardian

Date

Make checks payable to:

**Howell PAL**

**PO Box 713**

**115 Kent Road, Howell, NJ 07731**

**Phone: 732-919-2825 Fax: 732-919-1212**

**[www.howellpal.org](http://www.howellpal.org)**

**Please mail all registrations to PO Box 713**

(PAL Office Use Only)

CHECK \_\_\_\_\_ CASH \_\_\_\_\_ AMT \_\_\_\_\_ RECEIVED BY \_\_\_\_\_

### Howell PAL Participant Waiver

NOTE: This form must be read and signed before the member is allowed to take part in any Howell PAL program. By signing this form, the participant and/or parent or guardian agrees that they have read this waiver.

Program Name: \_\_\_\_\_

Member's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ DOB: \_\_\_\_\_

In consideration of my involvement in any Howell PAL program under the auspices of the Howell PAL, their officers, volunteers, staff, sponsors, and or agents acknowledge, appreciate and agree that:

1. I RISK BODILY INJURY, INCLUDING PARALYSIS, DISMEMBERMENT AND DEATH, while the particular rules of the sport, equipment, and personal training and discipline may reduce this risk. The risk of injury does exist, as does the risk of damage to or loss of property.
2. I knowingly and freely assume all risks both known and unknown, even if arising from negligence of the above mentioned parties.
3. I willingly agree to comply with the stated and customary terms and conditions for participants, if however I observe any unusual or unnecessary hazard during my presence or participation, I will bring these incidents to the immediate attention of the nearest PAL Staff/Chaperone.
4. For myself, and on behalf of my heirs, those assigned as a personal representative and next of kin, hereby: release, hold harmless and promise not to sue Howell PAL, their officers, volunteers, staff, or sponsors. Further I and or my parent/guardian releases liability of any of the fore mentioned to any and all injury and loss arising from my participation, whether caused by negligence or otherwise, except that which is the result of gross negligence or wanton misconduct.
5. I grant the Howell PAL, its representatives and employees the right to take photographs of my child in connection with the above identified subject. I authorize Howell PAL, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that Howell PAL may use such photographs of my child with or without their name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.

I have read this Release of Liability and Waiver of Agreement and fully understand its terms and sign it freely and voluntarily.

This signature is to certify that I, as a parent/guardian with legal responsibility for this participant, consent to the above mentioned and agree to his/her release, and also agree for myself/ourselves, my/our heirs, assigns and next of kin, to release and identify from all liability, incidents to my /our child's involvement as stated above.

X \_\_\_\_\_  
Parent/Guardian Signature Date Signed

X \_\_\_\_\_  
Member Signature Date Signed

# Howell Pride Lacrosse Club

## Work Bond Program

A work bond program is a program where each parent submits an additional fee to the league upon registration. After a predetermined number of volunteering assignments have been met, the family is returned this fee.

Due to the increased interest and growth in the Howell Pride Lacrosse Club the need for additional volunteers to help out throughout the season has also increased. In an effort to meet these requirements, a work bond program has been implemented for the Spring 2018 season.

The cost for the work bond is \$50 per family; this check will be returned after the family has fulfilled their work obligation. Information regarding the work bond can be found on the club website, in the FAQ.

Please present a separate post-dated check, dated – June 9, 2018 - to “Howell Pride Lacrosse”. When registering using the paper form, please present this 2<sup>nd</sup> check at the time of registration. When using the online registration, please bring your volunteer bond to your respective teams 1<sup>st</sup> practice.

The work bond can be recovered by helping in any of the following areas throughout the season: coaching, field prep, field lining, fund raising, or club events. There may be other areas that will available during the season that are not in this list.

Player's Name: \_\_\_\_\_

Family's Name: \_\_\_\_\_

Area of Interest:

- Coaching
- Asst Coach
- Field Prep
- Field Lining
- Fund Raising
- Admin Tasks
- Club Events

(PAL Office Use Only)

CHECK \_\_\_\_\_ CASH \_\_\_\_\_ AMT \_\_\_\_\_ RECEIVED BY \_\_\_\_\_