



# **BAY PORT LACROSSE** *Never Be Satisfied*

Head Coach: Chris Green - 2710 Lineville Road • Green Bay, WI 54313 • Phone: 920:662-77171 • Email Chris\_Green@mmmtsales.com

## **2015 Bay Port Pirate Youth Lacrosse Camp**

The Bay Port Lacrosse Parent Booster Club along with the Bay Port Lacrosse Team is conducting a youth Lacrosse camp for boys & girls entering grades 4 - 9. The purpose of the camp is to help grow the sport in the Green Bay area. Players will be instructed on offensive and defensive fundamentals and skills needed to play lacrosse and to prepare them for the middle and high school levels. Along with this, we will stress things such as commitment, self-practice, teamwork, and sportsmanship. Staff will be made up of current and past coaches, and players.

**Who:** Boys & Girls entering grades 4 - 9

**When:** Monday, June 15 - Wednesday, June 17. 2 - 4 p.m. (Be there at 1:45 on the first day to sign in.)

**Where:** Bay Port Turf Lacrosse Field (Bay Port Athletic Stadium – northeast of the high school)

**Cost:** \$35.00 (Includes Camp T-shirt) Checks payable to: **Bay Port Lacrosse.**

**Equipment Needed:** Workout/athletic clothes, lacrosse, football, soccer spikes, or tennis shoes. Bring tennis shoes to practice inside in case of inclement weather. If you do not have a stick, sticks will be provided. (Request a stick on the registration form.) Gloves and elbow pads are optional, but suggested.

Send to: Coach Dave Destache  
2827 Riveridge Lane  
Green Bay, WI 54313  
Phone: 434-8295  
[DaDishGB@gmail.com](mailto:DaDishGB@gmail.com)  
**Make Checks payable to: Bay Port Lacrosse**

Please Register By:  
**Monday, June 8 - 2015**

Walk-ins will be accepted,  
but a T- shirt is not guaranteed.

-----Detach and Return with payment-----

Name \_\_\_\_\_ 2015-2016 Grade \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

I will need a stick to use for the camp: YES NO

T-Shirt Size: **Youth Size** L or **Adult Sizes** S M L XL 2XL (Circle one)

**PARENT PERMISSION:** I give permission for my child to participate in the Bay Port Lacrosse Parent Booster Club Youth Lacrosse Camp. I accept full responsibility for any injury my child might receive while participating in this camp. He is fully covered by a private insurance carrier.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_