

Camp Director: Tris Wood

Coach Wood has been coaching or playing lacrosse for close to thirty years. A former DIII standout attackman at Hartwick College, he has coached at every level, from youth to college. Most recently, he was the head boys coach at Peddie School. At the helm of the Peddie program, Wood guided his teams to three straight state title games and compiled a .750 winning percentage. His players moved on to such programs as Butler, Delaware, Georgetown, Holy Cross, Navy, Lafayette, Lehigh, Middlebury, Stevens, Villanova, and Wesleyan. Coach Wood is the current freshman boys coach at Peddie School.

Girls Head Coach: Allison Treese

Coach Treese joins the Hot Shot staff this summer, though she is no stranger to the Peddie campus. The Trenton Times 2003 Coach of the Year and former Peddie head coach, Treese guided her 2003 team to the schools first Prep A championship in girls lacrosse. She brings a wealth of experience both as a standout player at Hamilton College and as a highly regarded high school coach.

Other staff include current college and high school players with a proven record of excitement for the game and excellence in working with children. Fun is number one at Hot Shot Lacrosse Camp!

During the week, campers will work on:

- * Individual stick skills
- * Offensive and defensive strategies
- * Team tactics
- * Specialized goalkeeper training

About the camp:

- * Five days of lacrosse instruction
- * Phase I camp runs from 8:30 am to 12:00 am
- * Phase II camp runs from 9:00 am to 3:30 am
- * Staff to camper ration of 1: 8 at most
- * Players grouped according to age and ability
- * Certified athletic trainer on staff
- * **2006 marks our 5th year as a camp!**

Cost:

Phase I camp: \$160
Includes stick, jersey/t-shirt, snack, and prizes!

Phase II camp: \$275
Includes snack, lunch, jersey/t-shirt, and prizes!

Discount:

\$20 off for second child

www.hotshotlacrosse.com

Registration

Camper's Name: _____

Entering Grade: _____ DOB: _____

Parent Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Home Phone: _____

Father's Cell Phone: _____

Mother's Cell Phone: _____

E-Mail Address: _____

Reversible Jersey/T-Shirt Size (Circle One)

Boys M L Girls S M L

HOT SHOT LACROSSE CAMP

Phase I: Boys and girls entering grades 3-5
8:30 am-12:00 pm. \$160

Phase II: Boys and Girls entering grades 6-8
9:00 am - 3:30 pm. \$275

Session: July 17th - July 21st

I give permission for my son/daughter to participate in Hot Shot Lacrosse Camp. I also give permission for Hot Shot Lacrosse Camp to use photography of my child for publications and promotions. In all cases, Hot Shot Lacrosse Camp does not use names or addresses of campers when using their photos.

Signature (Parent or Guardian) Date

Campers will not be allowed to participate without a completed health form.

www.hotshotlacrosse.com

Health Form:

If the camper should be restricted from any activity, please note:

If the camper will be taking medication during camp, please indicate name of drug and dosage: _____

Please identify any medical condition, which would require special attention: _____

Immunizations	Allergies	Drug reactions
DATES REQUIRED	(yes/no)	(yes/no)
Tetanus Toxoid _____	Hay Fever _____	sulpha _____
Polio Vaccine _____	Asthma _____	Penicillin _____
Tuberculin Test _____	Eczema _____	Antibiotics _____
Measles _____	Insect Bites _____	Other _____
Rubella _____	Other _____	
Mumps _____		

Emergency Contact Information

Name: _____

Phone: (_____) _____

Agreement to Participate/Permission to Treat

I, the parent of _____, realize that lacrosse camp is a vigorous physical activity, which involves running, jumping, physical contact, and projectile objects. I understand that participation in lacrosse camp involves certain inherent risks that regardless of precautions taken by Hot Shot Lacrosse Camp or the participants, serious injuries may occur. I UNDERSTAND THERE IS A RISK OF **SERIOUS INJURY** TO MY CHILD AS A RESULT OF CAMP ACTIVITIES, AND KNOWINGLY AND VOLUNTARILY ASSUME ALL RISK OF SUCH INJURY. I will be financially responsible for any medical attention needed during camp.

I confirm that my child has seen a licensed physician and is physically able to participate in camp activities.

I give permission for my child to receive emergency medical or surgical treatment and hospitalization if necessary. I understand that every attempt will be made to contact me, or the named emergency contact person, before this action is taken.

Signature (Parent or Guardian) Date

www.hotshotlacrosse.com

Daily Schedule: Phase I

- 8:30 Announcements and stretching
- 9:00 Technical Training
- 9:30 Stations
- 10:00 Snack
- 10:20 Technical Training/Special Speaker
- 11:30 Games and contests
- 12:00 Pick-up

Daily Schedule: Phase II

- 9:00 Announcements and stretching
- 9:30 Technical Training
- 10:00 Snack
- 10:20 Skill Stations
- 12:00 Lunch
- 1:00 Contests
- 1:30 Games/instruction
- 3:30 Pick-up



- * Complete Registration
- * Complete Health Form
- * Include full payment
(Non-refundable after 6/15/06)
- * Checks made payable to **Hot Shot Lacrosse**
- * For more information, call:
(609) 426-9558
- * Mail to:

Hot Shot Lacrosse Camp
3 John Plant Drive
Hightstown, NJ 08520

Sponsored by



Register Early!

Hot Shot Lacrosse Camp
 3 John Plant Drive
 Hightstown, NJ 08520
 WWW.HOTSHOTLACROSSE.COM
 Info@hotshotlacrosse.com

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One session ONLY!
July 17-21

Boys and Girls
Entering
Grades 3-8



Hot Shot Lacrosse Camp 2006
At Peddie School