

IS PROUD TO HOST THE

2013 Kennebec Area Fall High School Lacrosse League

Sundays September 15 - October 27

Boys High School 8 v 8

\$900 per team/\$75 per individual

- Unique 8 v 8 format:
 2 defense, 2 attack, 3 middies, 1 goalie
- Full field played on turf
- Two 25 minute running time halves with a 10 minute break
- Certified officials, NCAA Rules
- Guaranteed 6 games plus playoff game:
 #1 v #2, #3 v #4
- Game Times: 10am and 11:15am
- Complete teams are encouraged to register. Individuals may also register and will be placed on a team.
- Reversible tank-tops included
- Registration deadline: September 6th!



League scores, standings announcements found here:

https://www.facebook.com/fallhslaxleague

Contact Todd Wheelden FMI: twheelden@kentshill.org 685-1666

FALL HIGH SCHOOL BOYS LACROSSE LEAGUE REGISTRATION FORM Enrollment is limited to boys currently in grades 9-12. Fee: \$75 as individual

If registering on a team, i	ndicate team name and pers	on res	ponsible for payment	:
Team Name	Team Rep		_ Phone	,
Player Name	Town	_	Grade	
Address	Town		_Zip Code	
Player Phone	Parent Phone			
Player Email	Parent Email			
High School Attending _				
In the Spring of 2012. I pl	ayed (circle one): 8th grade	- JV (H	S) - Varsity (HS)	
Position Played (circle or	ne): Attack - Midfield - Defer	ise - Go	oaltender	
Any physical limitations	or allergies?			
Insurance Carrier	or allergies?Policy	ID #		
Mail this regist	ration form and check payable	to Ken	ts Hill School to:	
Fall H	IS Lacrosse League / Attn: T	odd W	heelden	
	Kents Hill School			
	PO Box 257			
	Kents Hill, ME 0434	9		
Questions may be dire	cted to Todd Wheelden: 685-	1666 or	twheelden@kentshill.c	<u>org</u>
	Waiver and Release of Lial	bility		
and any of their employees, instructors, vo from ordinary negligence on the part or result of my engaging in lacrosse activit voluntarily waive any and all claims bestate, heirs, estate or assigns, and I I am aware that lacrosse is a vigorous act involves certain risks, including but not lin serious injury to virtually all bones, joints, serious injury. I further understand that pa tissue and bone contusions, and facial inju but not limited to, travel to and from the I am voluntarily participating in this act I further agree to indemnify and hold lacrosse activities or a I understand that this waiver is intended to held invalid, the remainder of the waiver of I affirm that I am of legal age and am free giving up legal rights and/or remedies of	coby forever release and covenant not-to-sue laborates, agents, and all others who are involved fixents Hill School or others listed for properties or any activities incidental thereto, wherever the both present and future, resulting from ordinarelinquish on behalf of myself, spouse, heirs invity that can involve severe cardiovascular stream ted to death, serious neck and spinal injuries remuscles, and internal organs, and that equipment reticipation in lacrosse involves a particularly high ries. In addition, I understand that participation is site of the activity, participation at sites that me possible reckless conduct of other participative with knowledge of the danger involved and damage, personal injury, or dead that harmless Kents Hill School and others listed the participation in full legal force and effect. I further in the State of Maine. The state of Maine is signing this agreement. I have read this forwhich may be available to me for the ordinary nearly signing this agreement. I have read this forwhich may be available to me for the ordinary nearly signing this agreement is a bindir on. READ THIS DOCUMENT CAREFULL	d, from any ty damage, per, whenever hary neglige and assigns ss and viole esulting in control provided the risk of control in lacrosse in ay be remote cipants. and hereby th. I for any cla ever, or how aws of the S her agree th m and fully egligence of ng legal doc	y and all present and future claims personal injury, or wrongful death, at a r, or however the same may occur. It ence, that may be made by me, my the right to recover for injury or ent physical contact. I understand that complete or partial paralysis, brain da for my protection may be inadequate incussions, AC joint sprains or separativolves activities incidental thereto, the from available medical assistance, agree to accept any and all risks of the same may occur. It is a gree that if any at the venue for any legal proceeding a understand that by signing this for Kents Hill School or any of the partition.	resulting rising as a hereby family, death. t lacrosse amage, and to preventations, sof including and the fation in propertion in gs shall be orm, I am
(Signature of Participant)	Date Signed			
(Printed Name of Participant)				
-				
FALL HIGH SCHOOL LACROSSE LEAG (Name of Group or League Affiliation)	<u>GUE</u>			

Date Signed

(Signature of Parent/Guardian if Participant is a minor)