

Montville Recreation Department's

LACROSSE SQUIRTS



WHO: Ages 4-7

WHAT:

Ages 4-5—Squirts Lacrosse is the perfect introduction to the nation's fastest growing sport. Skills covered include stick familiarity, scooping, catching, shooting and more. Each session is taught through structured activities, fun games, and scrimmages designed to ensure learning and most importantly: fun, fun, fun!

<u>Ages 6-7</u>—Foundation Lacrosse is designed to introduce beginners and those with some experience to the fundamentals of lacrosse. Our professional, qualified coaches will cover different topics and themes each session, including scooping, passing, catching, cradling, and shooting.

NJ DOH guidelines will be followed for all classes. Check out this link for specifics: https://usasportgroup.com/parents/parent-information-for-camps-classes/?site=sports

WHERE: Montville Community Park Grass Field # 1 (by bathrooms), 130 Change Bridge Road in Montville

WHEN: Fridays: September 18, 25, October 2, 9, 16, 23 & 30

SESSION	<u>AGES</u>	<u>TIME</u>
1	Ages 4 to 5	3:45pm to 4:45pm
2	Ages 6 to 7	5:00pm to 6:00pm



* For all weather and program information including cancelations and make ups go to: https://usasportgroup.com/recreation/159-montville-recreation-montville-nj

INSTRUCTORS: USA Sports Group Staff

FEE: \$142.00 per child per 7 (seven) week session.

NOTE: There will be a \$20.00 processing fee for program refunds PRIOR to program start!

PAYABLE TO: Montville Recreation (located at 195 Change Bridge Road in Montville)

REGISTRATION PROCEDURES:

1. On-Line from Home (Echeck with 1% Fee OR Credit Card with 3% Fee)

OR 2. Payment Drop Box in Municipal Building's Parking Lot (Check Only...must have family page set up on Community Pass)

For On-Line Registration !!! Go to the town's website at: http://www.montvillenj.org/RecRegistration
To Download Registration Forms go to: http://www.montvillenj.org/RecFlyers

QUESTIONS ??? Call Recreation: (973) 331-3305 OR Visit our Website: www.montvillenj.org



Parent/Guardian Signature

FOR OFFICE USE (8/17/20): Fee Paid_____

LIKE us on FACEBOOK at: https://www.facebook.com/Montvillerec/



Date

<u>Program # 891</u>

Received By _____

LACROSSE SQU	JIRTS	- Fall 20	20				
** <u>NOTE</u> : You can register directly fro				<u>rk</u> !			
Participant Name	Age	D/O/B	Grade	School	_		
Address Town		Home Phone _					
Primary Contact Name/Relation/Phone #					_		
Secondary Contact Name/Relation/Phone #					_		
E-Mail/s (Please print clearly! Distinguish b/w letters & numbers	!)						
Emergency Name & Phone # (IF the above cannot be reached)							
PLEASE CIRCLE SESSION CHOICE/S	: <u>1</u> (A	ges 4 to 5) OR	<u>2</u> (Ages	6 to 7)			
Please list any special needs that you or your child may have that	will assist	us in providing a s	uccessful exp	erience:			
My child has my permissi I understand that the Recreation Departs				nce.			

Cash Check Date____