



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!

Ages 6-7—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/covid-19-information>

WHERE: ***Montville Community Park Grass Field # 2-B*** (side closest to Field 3), 130 Change Bridge Road in Montville

WHEN: Fridays: April 23, 30, May 7, 14, 21, 28, June 4 & 11

SESSION	AGES	TIME
1	Ages 4 to 5	4:00pm to 4:50pm
2	Ages 6 to 7	5:00pm to 5:50pm



* 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: \$162.00 per child per 8 (eight) 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

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

LACROSSE SQUIRTS – Spring 2021

****NOTE: You can register directly from home! No need to fill out paperwork!**

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: **1—Ages 4 to 5** **OR** **2—Ages 6 to 7**

Please list any special needs that you or your child may have that will assist us in providing a successful experience:

My child has my permission to participate in this class.
 I understand that the Recreation Department **DOES NOT** provide accident insurance.

Parent/Guardian Signature _____ Date _____

FOR OFFICE USE (2/17/21): Fee Paid _____ Cash _____ Check _____ Date _____ Received By _____ **Program # 891**