



2017-18 CLEVELAND SUBURBAN LACROSSE WINTER LEAGUE REGISTRATION

\$160 FOR 8 GAMES, SHIRT, JERSEY. REGISTRATION CLOSES AT 150 PLAYERS. APPLICATIONS MUST BE IN BY Dec. 17TH WINTER HAS SOLD OUT LAST 13 YEARS. PLAY WITH THE BEST FROM ALL OVER CLEVELAND. Cleveland Suburban is the longest running field indoor league in Cleveland, created to offer layers the best coaching, competition and experience in the area. Entering its 17th year, as a program run by college coaches, the league is known for its balanced competition, hands on player coaching, and is a stop on the recruiting trail.

PLAYER INFORMATION

Name _____ High School _____
Address _____ City/ Zip _____
Telephone- home _____ Cell _____
E-mail address (NEED FOR ALL LEAGUE UPDATES) _____
Position _____ Age _____ Years of Experience _____ Grade _____ Jersey and T-shirt Size : S M L XL
Most Recent team: _____ Carpool requests: _____

Players responsible for all MANDATORY equipment, which Includes: helmet, arm guards, gloves, shoulder pads, stick & mouth guard.

**SEND FORMS TO CLEVELAND SUBURBAN LACROSSE 2201 GLENBURY AVE. LAKEWOOD, OH 44107
PLAYERS CAN ALSO REGISTER ONLINE AT WWW.CLEVELANDSUBURBANLACROSSE.COM**

LEAGUE INFORMATION

LOCATION, DATES AND TIMES:

WEDNESDAYS FROM DEC 20 TO FEB 7 AT 4, 5, 6, 7 or 8 . NEO SOCCER FACILITY, 6200 PEARL RD. PARMA HEIGHTS 44130

APPLICATION

\$160 PAYMENT IS DUE IN WITH REGISTRATION. PAYMENT BY CASH, CHECK OR ONLINE. PAYMENT MUST BE RECEIVED BY **DECEMBER 11th**. THERE'S A NON- REFUNDABLE \$25 FEE. RETURNED CHECKS SUBJECT TO A \$35 PENALTY.

RULES

THE GAME IS 7 ON 7, WITH 2 ATTACK, 2 DEFENSEMEN AND 2 MIDDIES. ALL RULES FOR OUTDOOR LACROSSE WILL BE ENFORCED, OFFICIALS WILL NOT TOLERATE DISORDERLY CONDUCT. UNNECESSARY ROUGHNESS, EXCESSIVE SLASHING, ILLEGAL BODYCHECKS AND UNSPORTSMANLIKE CONDUCT CAN RESULT IN GAME MISCONDUCT OR EXPULSION FROM LEAGUE. THE GAME IS PLAYED IN 2- 25 MINUTE HALVES WITH A 5 MINUTE HALFTIME.

TEAMS

PLAYERS WILL BE SPLIT AMONG 10 TEAMS. EACH TEAM COMPRISED OF NO MORE THAN 14 PLAYERS, TEAMS MADE UP OF PLAYERS FROM ALL 4 GRADES AND DIFFERENT SCHOOLS. SCHEDULES/ROSTERS WILL BE SENT ON **MON DEC 18th**.

SEASON

TEAMS PLAY 5 GAMES AND 3 PLAYOFF GAMES, CULMINATING IN THE CHAMPIONSHIP ON FEB 1; THERE IS A MAKEUP/EXTRA WEEK IF NEEDED. ALL STAR GAME IS FEB. 19

ADDITIONAL INFO

EVERY PLAYER SHOULD BE AT THE FIELD 15 MINUTES BEFORE THEIR FIRST GAME. ONLY WATER AT THE FIELD.

ANY QUESTIONS CONTACT THE DIRECTOR BILL SCHMOLDT AT CLEVELANDLACROSSE@YAHOO.COM (440) 669-8064

PARENTAL CONSENT AND MEDICAL INFORMATION

Medical Emergency Contact Information

Name _____ Relation to Player _____
Phone (Day) _____ (Night) _____

The undersigned being a parent or legal guardian of the child requesting league admittance, does hereby affirm that the applicant is in good health, and suffers from no illness, disability or condition that requires the taking of medication on a regular basis unless that condition is disclosed and approved. Furthermore, the undersigned has no knowledge of any reason the applicant cannot participate in vigorous physical activity. The undersigned expressly agrees to be responsible for any medical bills incurred in the treatment of any illness or accident. In the event of any such accident or injury, I hereby consent to allowing any of the league supervisors to procure any medical treatment deemed advisable on behalf of my child or ward without prior consent. No primary medical insurance is provided by the Cleveland Suburban Lacrosse League or NEO Soccer.

I understand that, as a condition of admittance as a participant in the league, the undersigned, on behalf of all parents and guardians and on behalf of the applicant, hereby releases Cleveland Suburban Lacrosse, NEO Soccer, Bill Schmoldt and all other employees or agents of the league from any and all liability from injury or illness, mental or physical, suffered by the player during or related to the league, unless caused by willful act or gross negligence by the person or entity against whom the claim is made.

Signature of Parent/Guardian _____ Date: _____

LEAGUE COST IS \$160 DOLLARS. FEES AND FORM DUE BY SUNDAY DEC. 17th. CLOSES AT 150 PLAYERS.

Please make checks to: Cleveland Suburban Lacrosse 2201 Glenbury Ave. Lakewood, OH 44107

LEAGUE USE ONLY: Method of Payment Check # _____ Cash _____ Online _____

FEE: _____ DATE: _____ JERSEY: _____ TEAM: _____