



## **Cougar Lacrosse Camp**

**July 15<sup>th</sup> – 18<sup>th</sup>, 2019**

**9:00a.m. – 12:00 p.m.**

### **Cranford's Memorial Turf Field**

#### **Camp Director**

**Al Reinoso- Head Coach, Cranford High School**

**Section 1 – Northeast United States Lacrosse Coach of the Year 2015**

**NJSCA State Lacrosse Coach of the Year 2015**

**Star-Ledger Lacrosse Coach of the Year 2015**

**NJILCA "Coach of the Year" 2006, 2008, 2015**

#### **Outstanding Staff includes:**

**JJ Hoeffler – Assistant Coach Cranford High School, Ex-Collegiate Head Coach  
All-State Cranford High School Player**

**Matt Trapani – Collegiate Assistant Coach  
All-Section Player, Cranford High School**

**Corey LaForte – Assistant Coach Cranford High School  
Ex-Head High School Coach  
All-Conference Player, Cranford High School**

**Michael Cohrs – Assistant Cranford High School  
Collegiate Player  
All-Conference Player Livingston High School**

Plus many of Cranford High School's All-Stars and college players all week!

### **Camp Information**

- Grades 2-9
- NO EXPERIENCE is required: beginner instruction is offered**
- Campers are grouped based upon age, ability, and prior experience
- Equipment is mandatory
- Bring your own lunch

### **Areas of Instruction**

Both Individual and Team concepts taught

Attack: Techniques in passing, feeding, dodging, shooting, stick protection, and riding

Midfield: Techniques in faceoff's, groundball work, passing, shooting, stick protection, dodging, and defending

Defense: Techniques in positioning, passing, sliding, off-ball play, communication, and stick work

Goal Tending: techniques in positioning, stopping shots, passing, clearing, and communication

Speed Training: important aspects of form running, agility, flexibility, and conditioning vital to all sports

### **Camp Philosophy**

**The camp's philosophy is to teach, as well as enhance, the skills of lacrosse for each camper. Lacrosse is the nation's fastest growing sport. It is also the most fun! We want to teach young athletes what makes the game so enjoyable, by providing expert instruction in all aspects of the game. At the same time, we will provide a camp atmosphere that is fun, providing expert instruction in all aspects of the game.**

#### **Equipment needed:**

Athletic footwear

Lacrosse Stick

Lacrosse helmet and mouthpiece

Lacrosse gloves, shoulder pads, and arm pads

### **Pay online by credit card**

**[https://www.paypal.com/cgi-bin/webscr?cmd= s-xclick&hosted\\_button\\_id=5LS98QDA7YDU6](https://www.paypal.com/cgi-bin/webscr?cmd=s-xclick&hosted_button_id=5LS98QDA7YDU6)**

or

**<https://www.signupgenius.com/go/30E0449A5A72EABFA7-cranford>**

**Fee: \$140.00**

**On-site registration: \$160.00**

**Make checks payable to A.J. Reinoso**

Mail registration form and payments to: 1142 Midwood Drive  
Rahway, NJ 07065

For any further information, please contact Coach Reinoso at 732-762-0667

## Cougar Lacrosse Camp Registration Contract

I hereby give my permission and approval for my child to participate in the Cranford Cougar Lacrosse Camp. I assume all risks and hazards incidental to such participation, and hereby release Cranford Cougar Lacrosse Camp, its employees, and agents from any and all liability arising from injury or injuries sustained by my child while participating in the camp, league, competitions, or any other activities. The Cranford Cougar Lacrosse Camp assumes no responsibility for any damage or loss of any personal or team property.

I hereby authorize the directors and employees of the Cranford Cougar Lacrosse Camp to obtain medical care for injuries or illness that may affect my child or which might occur during the Lacrosse Camp activities. I further direct all medical or hospital facilities to accept this document as authorization to render emergency care to my child should it be deemed medically necessary. All campers must have their own medical coverage. Campers will not be allowed to participate unless the following information is submitted and the form is signed by the legal guardian of the camper. By signing below, I assure that I have read and understood the above liability waiver.

Parent Signature \_\_\_\_\_

Parent Name (please print) \_\_\_\_\_

Players Name \_\_\_\_\_ DOB \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_

Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Telephone Emergency \_\_\_\_\_

Medical Conditions (i.e. asthma) \_\_\_\_\_

Insurance Company and Number \_\_\_\_\_

Physician \_\_\_\_\_

Position (Circle One )    **Attack**                      **Midfield**                      **Defense**                      **Goal**

Shirt Size (Circle One)            **S/M**            **L/XL**

School Attending in September 2018 \_\_\_\_\_

Grade Entering in 2018 \_\_\_\_\_

Parent Email Address \_\_\_\_\_