



## Wavier Agreement for Release of Liability

My child has permission to attend and participate in the Minnesota Lacrosse Skills Clinics summer camp. I understand, acknowledge, and agree that this lacrosse camp has inherent risks of physical injury to my child and others, including but not limited to serious bodily injury, partial or total disability, paralysis, death and other damages which may arise therefrom and that, I have full knowledge of said risks. I acknowledge that these risks and dangers may be caused by my child's negligence and/or negligence of others. I further acknowledge that there may be other risks and dangers not known to me, my child, Justin Gervais or the Minnesota Lacrosse Skills Clinics LLC entity that are not reasonably foreseeable at this time. I agree to be solely responsible for all medical, and other, costs arising from any injuries that my child may receive while participating in the services of Minnesota Lacrosse Skills Clinics.

I further agree that prior to my child's participation; I/my child will address any unsafe equipment and/or conditions and immediately advise the rest of the participants and camp facilitators of such conditions. Additionally, I/my child will refuse to participate until the unsafe conditions have been removed. I further understand that Justin Gervais does not warrant any equipment used or supplied by themselves or by the location that the services provided by the Minnesota Lacrosse Skills Clinics LLC is being held. I agree to defend, release, and indemnify Justin Gervais and the Minnesota Lacrosse Skills Clinics LLC entity against and from any and all claims, expenses, costs, damages, loss, accidents, fines, judgments, awards, liabilities, and causes of action by whomever of wherever made or presented which may arise, however caused.

I acknowledge the reading of this agreement and acknowledge the receipt of a copy hereof and acknowledge further that I have not received or relied upon any statements or representations by Justin Gervais or Minnesota Lacrosse Skills Clinics LLC which are not herein expressed.

I agree to all terms and conditions herein expressed.

In testimony whereof, I subscribed my signature as the day and year written below.

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

On Behalf of \_\_\_\_\_  
(Camper's Name)

Date \_\_\_\_\_

## MLSC Summer Camps

Here's an opportunity to bring your lacrosse skills to the next level and gain many knowledgeable insights of the fundamentals of the game from some of MCLA's top collegiate athletes. **MLSC guarantees low counselor-to-camper ratios.** This allows for individualized instruction in interactive learning situations including **stick and shooting drills, basic offensive and defensive sets, scrimmages, games, and fun contests with great prizes!** Along with this quality guidance each camp participant will receive a customized MLSC reversible pinnie upon arrival and a MLSC hat as a prize at some point during the camp. **Special guests such as harrow's regional representative will also be on site displaying the latest and greatest lacrosse gear. This is a rare opportunity for you to see and tryout the most current lacrosse equipment. Gear will also be available for purchase.**



(MLSC apparel included in camp fee)

## Minnesota Lacrosse Skills Clinics LLC



WE KNOW AND LOVE  
LACROSSE!

Phone: 651.492.5412

[www.minnesotalacrosseskillsclinics.com](http://www.minnesotalacrosseskillsclinics.com)



## MLSC Camp Details

Be Elite! Minnesota Lacrosse Skills Clinics is devoted to developing athletes into better lacrosse players through: [interactive experience](#), [direct instruction](#), [personal evaluations](#), and [top level guidance](#).

### FULL CAMP

Where: Shamrock Park

When: TBA

Time: TBA

Ages: 8-15

Cost: \$175

### Half CAMP

Where: Shamrock Park

When: TBA

Time: TBA

Ages: 8-15

Cost: \$95

\*Camps Participant Limit of 50,  
Determined by First 50 to Pay.

### Daily Itinerary

8:30- Warm-up Run/Stretch

8:45- Ball Drills

- Passing w/ Right and Left hand
- Ground Balls w/ Right and Left hand
- 2 Pass Rollaway
- Over the Shoulder Passing
- Long Island Passing
- 3 Man Weave
- Star Drill
- Man/Ball Drill

10:00- Water & Snack/Lunch Break

10:15- Offensive Set Walk Through

10:30- 6 on 6 w/ Offensive Focus

11:00- Defensive Set Walk Through

11:15- 6 on 6 w/ Defensive Focus

11:45- Scrimmage/Games/Contests

12:30- End of Camp Session



## What To Bring

- Lacrosse Equipment
  - Helmet
  - Shoulder Pads
  - Elbow Pads
  - Gloves
  - Stick
  - Cleats or Athletic Shoes
- Fluids (Water, Gatorade, PowerAde, etc...)
- Snack/Lunch
- Positive Attitude

\*Beginners that do not have required equipment may contact Justin @ 651.492.5412 to inquire about use of MLSC equipment, while supplies last.



Minnesota Lacrosse Skills  
Clinics LLC

#### Contact Information

Justin

Phone: 651.492.5412

E-mail: [jpgervais@csbsju.edu](mailto:jpgervais@csbsju.edu)



## Sign-up Form

<i>Sign up for:</i>	<i>Time</i>	<i>Price</i>
<input type="checkbox"/> Full Camp: July 21-24	8:30-12:30	\$175

<input type="checkbox"/> Half Camp: July 12-13	8:30-12:30	\$95
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Camper's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Parent's Name \_\_\_\_\_

Address, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Lacrosse Team \_\_\_\_\_

Years of Experience \_\_\_\_\_

### *Method of Payment*

Check       Cash

\*Checks made to *Minnesota Lacrosse Skills Clinics LLC*

Register Online at:

[www.minnesotalacrosseskillsclinics.com](http://www.minnesotalacrosseskillsclinics.com)

Mail Sign-up Form and Check to:

Minnesota Lacrosse Skills Clinics LLC  
3504 Tiffany Lane  
Shoreview, MN 55126

\*For any registration questions see contact information.