

16th Annual Cardinal Lacrosse Camp 2011

Registration Form

(Please Print Clearly)

July 18-21 • Ages 6-13

Camper Name _____

Parents' Names _____

Address _____

Phone _____

E-mail Address _____

Age _____

Grade entering Fall '11 _____

School Attending Fall '11 _____

Recreation Program _____

Years of Experience _____

Check one position:

Attack

Goal

Defense

Midfield

Please send information to my friend:

Name _____

Address _____

Complete both sides of this reservation form
and mail along with payment to:

Cardinal Lacrosse Camp

c/o Bryan Kelly
301 International Circle
Hunt Valley, MD 21030

WHAT WILL IT COST?

The fee for Lacrosse Camp is \$175.00.

Please make checks payable to:

Cardinal Lacrosse Camp

WHEN AND WHERE IS THE CAMP?

The Cardinal Lacrosse Camps will be held at Loch Raven Academy in Towson, MD for ages 6 to 13 from Monday, July 18th thru Thursday, July 21st from 5:30 P.M. to 8:00 P.M.

FOR MORE INFORMATION

For questions and information regarding the Cardinal Lacrosse Camp, please call Bryan Kelly at 410-891-3019. Registration will be held at the back of Loch Raven Academy (8101 LaSalle Road).

16^b ANNUAL

CARDINAL LACROSSE CAMP

2011

Ages 6-13 + July 18-21, 2011

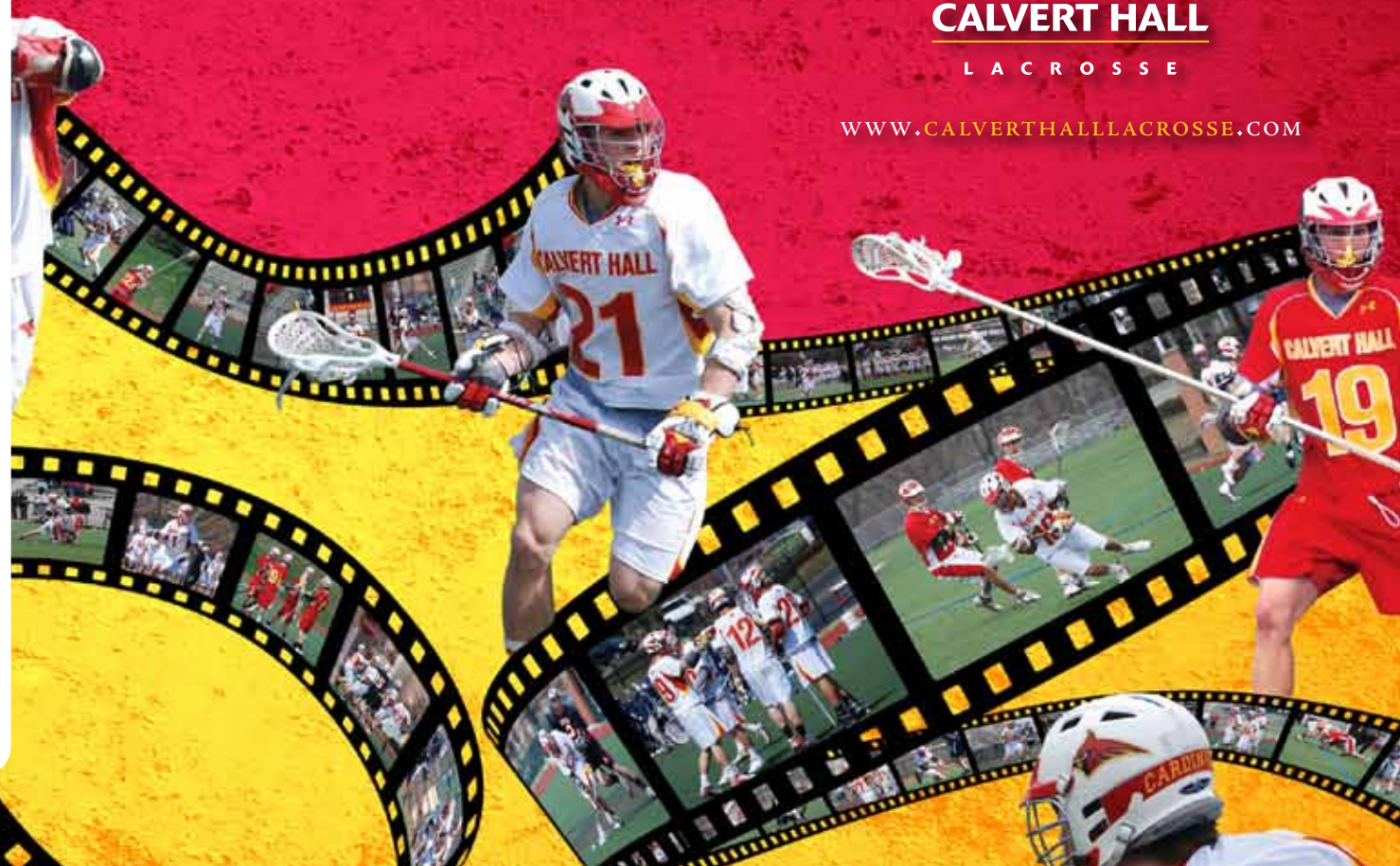
Camp Held at Loch Raven Academy in Towson, MD



CALVERT HALL

LACROSSE

WWW.CALVERTHALLLACROSSE.COM





16th ANNUAL

CARDINAL LACROSSE CAMP

2011



The primary goal of the Cardinal Lacrosse Camp is to provide an intense learning experience for the advanced and the beginning player. The Coaching staff's focus on the 'team concept' and the improvement of individual talents will enable each athlete to take his game to the next level. The camp's expected player to coach ratio of 6 to 1 will provide a unique opportunity to come away with the special attention needed to improve each player's lacrosse skills.

| Date | Age | Time |
|------------------|------|------------------|
| July 18-21, 2011 | 6-13 | 5:30 - 8:00 p.m. |

Cardinal Lacrosse Camp 2011 Staff

BRYAN KELLY

Coach of 2003 MIAA Champions
 Calvert Hall's Head Varsity Lacrosse Coach
 1996 & 2003 "Coach of the Year" & "USA Lacrosse Coach of the Year"
 All-American Defenseman at University of North Carolina (UNC)
 Member of 1991 UNC National Championship Team
 All-Club 1992-1997- MD Lacrosse Club
 2x HS All-American at Calvert Hall
 Member of USA Under 19 World Championship Team

KEVIN HUNTLEY

3x College All-American at JHU
 2x HS All-American at Calvert Hall
 2x HS Player of the Year
 C. Markland Kelly Award Winner
 All-time leading scoring at Calvert Hall
 Member of the Under 19 Canadian National Team

CASEY CONNER

1st Team All-Metro 1996 at Calvert Hall
 3x All-American Defense University of Maryland
 Washington Power (Indoor Team)
 Professional Outdoor Lacrosse - Baltimore/Washington Bayhawks

DAVID HUNTLEY

3x All-American (2x-1st Team, 1-2nd Team) at JHU
 1979 National Midfielder of the Year
 Member of JHU All Time Team
 Member of 2 National Championship Teams at JHU
 Baltimore Chapter U.S. Lacrosse Hall of Fame
 1978 World Champion Canadian Team
 Coached 2006 World Championship Team
 Coached 1986, 1998, 2002 & 2006 Canadian Team
 Coached MILL/NLL World Champions Baltimore Bayhawks
 Head Coach Philadelphia Wings

TORRE KASEMEYER

Assistant Calvert Hall Varsity Lacrosse Coach (Offensive Coordinator)
 All-American Attackman at Western MD
 2x All-Conference Attackman

DAVE CREIGHTON

Goalie Coach at Calvert Hall 1973-1981 ; 2008-Present
 3x All-American at Hobart College
 Inductee - Hobart Hall of Fame
 Inductee - Baltimore Chapter of the Lacrosse Hall of Fame
 Member - Mt. Washington Club 1973-1981

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CARDINAL LACROSSE CAMP

2011

Parent's Consent

I give my permission for _____
 to participate in all activities of the Cardinal Lacrosse Camp.
 Further, I authorize the athletic trainer to administer needed
 first aid and to seek medical attention in case of an emergency.

In case of emergency, call:

Phone Number _____

Private Insurance information

Coverage of accidental injury is required by all participants. In
 most cases, family health insurance is adequate. Please indicate
 your family health insurance plan below.

Policy Number _____

Waiver and Release

We, the undersigned, for ourselves, our heirs, executors and
 administrators, waiver, release and forever discharge Cardinal
 Lacrosse Camp, Calvert Hall H.S., its staff, officers, agents,
 representatives, employees, successors, and assignees of and
 from all rights and claims for damages to person or property
 which may be sustained or occur during participation in camp
 activities, or from camps, whether paid damages, injury or loss
 are due to negligence or not.

Signatures:

Player _____

Parent _____

Date _____