



2018 Mid Missouri Lacrosse League Player Registration and Release Form for BOYS in Grades 3-8

To REGISTER online, go to the youth lacrosse website at
www.youth.columbialax.org

League Cost: \$75.00
Payable to Mid Missouri Lacrosse League (MMLL)

All players must be US Lacrosse Members. Youth membership is a \$25.00 annual fee. To become a member, go to www.uslacrosse.org

Registration forms also available online.

Registration Deadline: March 25, 2018
Late fee of \$20.00 assessed after deadline

Mail Registration form with payment to:
Mid Missouri Lacrosse League
Attn: Registrar
P.O. Box 7074
Columbia, MO 65205

Registration form, copy of insurance card and fee must be received by March 25, 2018 to avoid late fee. Registrations accepted up to April 13th, but a late fee of \$20 will be assessed to cover ordering additional t-shirts and/or jerseys.

Fee includes pinnie/game jersey to use during the season and all players get a free MMLL t-shirt.

Registration cost does NOT include a stick or protective gear.

Mandatory Equipment for Boys:

- Helmet
- Stick
- Protective Gear (Gloves, Arm Pads & Shoulder Pads)
- Athletic Cup
- Mouth guard
- Cleats are recommended but not required

Games will be played on Sunday afternoons on Cosmo Park LAX/Football field #5

- April 15th through May 20th
- Makeup Games will be scheduled during the week

Practices will be held 2 days per week (Tuesdays & Thursdays), 6-7:30pm, at Cosmo Park Soccer field 6, beginning the week of April 3th.

Sponsorship Opportunities

To keep player fees to a minimum, we seek support from area business and individuals for sponsorship of all teams. Your contributions are greatly appreciated!

[] YES! I would like to be a team sponsor. (\$250 tax deductible donation)

[] Donate to MMLL. I would like to donate \$5 \$10 \$20 \$25 \$50 Other \$ _____

Sponsor Name _____ Phone _____

Email address _____



Submit Registration online at www.youth.columbialax.org
 OR Mail Registration form with payment to:
 Mid Missouri Lacrosse League
 Attn: Registrar
 P.O. Box 7074
 Columbia, MO 65205

Registration Deadline: March 25
 Late fee after 3/25 = \$20.00

QUESTIONS?
 Mid Missouri Lacrosse League (MMLL) Website:
www.youth.columbialax.org
 Email: midmolax1@gmail.com

Player Name _____ DOB _____ Age _____ (As of Jan 1st)
 Male Female Grade: 3 4 5 6 7 8 Current School Attending: _____
 US Lacrosse # _____ Expiration Date _____ High School District _____
 T-shirt Size: (Adult): **S M L** (Youth): **M L**
 Address _____ State _____ Zip _____
 Father's Name _____ Ph _____ Email _____
 Mother's Name _____ Ph _____ Email _____

In case of emergency, when parent/guardian cannot be reached, please contact:

Name _____ Relationship to Player _____
 Phone #s: Home _____ Work _____ Mobile _____

Medical Information

Allergies _____ Other Medical Conditions _____
 Physician: _____ Ph: _____
 Dentist: _____ Ph: _____
 Medical/Hospital Insurance Company _____ Policy Number _____
 Insurance Co Phone # _____ Policy Holder's Name _____

Please include a front and back copy of your insurance card with this form.

*This authorization for emergency medical treatment must be completed before a player begins participation.
 Treatment for injury will be based on information provided here.*

Parent's/Guardian's Permission Form

I/We hereby give consent for my son/daughter _____ (*Name of Player*) to participate in practices and games organized by Mid Missouri Lacrosse League. If we cannot be reached in case of emergency, we also consent for Mid Missouri Lacrosse League to obtain a physician or hospital of the organization's choice, if such medical care is reasonably necessary for the welfare of the player, if he is injured in the course of lacrosse activities, practice or games. Furthermore, I release and hold harmless Mid Missouri Lacrosse League and its affiliates in the event of any injury sustained to my son/daughter through the routine course of practice and game play.

Signature of Parent or Guardian *Date* *Home Phone* *Mobile/Work Phone*

Please Print Parent or Guardian Name _____

Parent Opportunities

I am willing to assist by participating on a board committee (circle any that apply):

- | | | | | |
|-----------------------------|------------------------|---|--------------------------|---------------|
| MMLL Executive Board Member | Field Prep & Equipment | Scorekeeping | Uniforms | Communication |
| Marketing & Promotion | Team Parent | Hospitality (Concessions & Shirt Sales) | Fundraising/Sponsorships | |

Do not write in this box.

Received:	/ /	Check#:	Amount: \$	Team:	Initials:
-----------	-----	---------	------------	-------	-----------