

**Little Stars Sports Camp for Girls**  
**Monday, June 28<sup>th</sup> -Thursday, July 1<sup>st</sup>, 2010 5:30-7:30 PM**  
**T/E Middle School (next to Conestoga High School)**

*For girls entering 1<sup>st</sup>-4<sup>th</sup> grades*

**ABOUT OUR CAMP- LITTLE STARS** camp is designed to introduce girls from 1<sup>st</sup>-4<sup>th</sup> grades to the sports of field hockey, soccer and lacrosse. The staff will instruct the girls daily in each sport, while emphasizing fun and building confidence. In addition to sport-specific instruction each evening, the campers will also engage in activities and games to help reinforce the skills they have learned over the course of the week.

**CAMP DIRECTORS-**

**Jen Cadden-** Head Lacrosse Coach Conestoga H.S '03-'09, Coach of the Year '03'05. , PIAA District Champions '04,'05, '06, Central League Champions '05,'06, JMU lacrosse '93-'96, captain '96, All-American '95,'96, Asst. Coach JMU '97, Health and Physical Education Teacher VFMS '97-'98, Beaumont Elementary School Physical Education Teacher'98-'05.

**Karen Gately-** Head Field Hockey Coach Conestoga HS, Central League Champions '05, Shippensburg University field hockey and lacrosse '94-'98, field hockey and lacrosse captain, All-American '98, All-PSAC '98, English Teacher CHS

**CAMP STAFF-** Members of the Conestoga coaching staff as well as players from the area currently playing collegiate lacrosse.

**Questions?** Email Jen and Karen - littlestarssports@hotmail.com

**CAMP FEE: \$100**

Please tear off and return completed application with a deposit of **\$50**. Balance is due *upon arrival to camp*.  
Checks payable to: **GATELY, Inc.**

**Mail completed registration & \$50 deposit to:**

*212 Spring Run Lane Downingtown, PA 19335*

*\*\*\* Please note below what equipment you will NEED as we can provide loaners for the week of camp. We ask that if you have your own equipment, you bring it along to camp. All campers are REQUIRED to wear a mouthguard.*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell : \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Email address: \_\_\_\_\_

Grade entering September '10: \_\_\_\_\_

Shirt size (youth) XS: \_\_\_ S: \_\_\_ M: \_\_\_ L: \_\_\_ XL: \_\_\_

Parent/Guardian: \_\_\_\_\_ Insurance Company and Policy # \_\_\_\_\_

Emergency Contact- Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Equipment needed:

\_\_\_ Field hockey stick    \_\_\_ Lacrosse stick    \_\_\_ Shin guards (hockey/soccer)    \_\_\_ Lacrosse eyewear

Waiver & Release: I understand that the risk of injury to my child is possible while playing or practicing the sport of lacrosse. I authorize the directors to act for me according to their best judgment in any emergency requiring medical attention. Anyone associated with HotShots Lacrosse Camp will not assume campers' medical or dental expenses incurred as a result of participation in this program and will in no way be liable for any injuries that occur while attending the camp. In addition, I declare that the above named camper is in good health and able to participate in all camp activities.

Parent/Guardian Signature: \_\_\_\_\_

***Inclement weather policy:*** If the weather conditions deem the fields unplayable the session will be cancelled.

No refunds are given for cancelled sessions.

