

2011 TOP SHELF SUMMER LACROSSE CLINIC At The Governor's Academy



Monday, July 18 - Thursday, July 21 For Boys & Girls Entering Grades 3-9 • The Governor's Academy • Byfield, MA

The Mission of the Clinic

To teach and reinforce the fundamental individual skills, team concepts and sportsmanship necessary for developing competitive, successful lacrosse players.

Our individual skill development will focus on the correct techniques for stickwork, including passing, shooting, catching, cradling and stick protection. One-on-one dodging and defending will also be taught in advance of fundamental team concepts including transition and all-even situations. The importance of sportsmanship, respect and a positive attitude are reinforced throughout our program.

Daily Clinic Activities Include:

- Drills
- Demonstrations
- Games



For More Information
1.978.465.2206
topshelfflax@gmail.com
www.topshelfflax.com

The Clinic Facilities On Campus At The Governor's Academy

The Summer Lacrosse Clinic will be held on the campus of the Governor's Academy in Byfield, MA. Participants will have access to a variety of state-of-the-art athletic facilities, including the school's new 220 x 120 yard artificial "Field Turf" surface.

Between sessions, players and coaches will eat lunch in G.A.'s dining hall and relax in the Academy's student lounge and activity areas.

Each participant will receive a reversible mesh practice jersey.



Individual Skills
Team Concepts
Games & Competition
Sportsmanship
Fun

The Clinic Coaching Staff

The Summer Lacrosse Clinic is under the direction of Peter Bidstrup, the Governor's Academy head boys' lacrosse coach. In addition, the balance of the staff will include a select group of coaches, as well as current collegiate and professional players.



Peter Bidstrup
Head Coach, Boys' Lacrosse
The Governor's Academy

Clinic Director Peter Bidstrup has been involved with the game of lacrosse as a player, coach, clinician, parent and fan for over 30 years. During the past 16 seasons as head coach at The Governor's Academy, his teams have won or shared the ISL title in 2002, 2006, 2007, 2008, and 2009. Coach Bidstrup, the '08 ISL Coach of the Year, has produced 10 All-Americans, and numerous All-League players, many of whom have played or are playing at the collegiate level.



Roberta McLain
Athletics Director
Head Coach, Girls' Lacrosse
The Governor's Academy

Roberta McLain, current athletics director and head girls' lacrosse coach at the Governor's Academy will direct the girls' clinic. Coach McLain was inducted into the New England Lacrosse Hall of Fame in 2005 and remains active at the national level with US Lacrosse, the USWLA and the US women's under 19 national team. She is an experienced clinician and educator.

Typical Daily Clinic Schedule

| | |
|----------------|--|
| 9:15 AM | Participant Drop Off |
| 9:30 AM | Session I On-Field Instruction |
| Noon | Lunch / Break GA Dining Hall |
| 1:00 PM | Session II On-Field Instruction |
| 3:15 PM | Participant Pick Up |

Additional Forms Are Available On-Line
www.topshelfflax.com



**2011 SUMMER LACROSSE CLINIC
REGISTRATION FORM**

Please complete this form and return by mail to:
Top Shelf Lacrosse • 188 Middle Road • Byfield, MA 01922

PARTICIPANT INFORMATION - All Fields Required

Please Check One

Name: _____ Male Female
Last First

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ - _____

Parent / Guardian: _____
Last First M.I.

Parent / Guardian E-Mail Address: _____

For Emergency Use Only:
 Parent / Guardian Cell Phone(s): (____) _____ - _____ (____) _____ - _____

Participant's Age: _____ Date of Birth: ____ / ____ / ____ Grade Completed As of 6/11: _____

School Attending in September 2011: _____

Lacrosse Position(s): _____

Experience Level: ___ Beginner ___ 1-2 Years ___ 3-4 Years ___ 5 or More Years

PARTICIPANT HEALTH INSURANCE INFORMATION - All Fields Required

Name of Insured: _____
Last First M.I.

Relation to Participant: _____

Health Insurance Company: _____

Policy Authorization Number(s): _____

PARTICIPANT MEDICAL INFORMATION - All Fields Required

Name of Physician: _____
Last First

Office Phone: (____) _____ - _____

Special Medical Conditions of Concern: _____

2011 Clinic Fee and Refund Policy

*The fee is \$350.00 and includes lunch and a reversible tank.
Please choose a payment option, and make checks payable to "Top Shelf Lacrosse."*

- Option 1: 50% (\$175) to reserve a place in the clinic. Balance (\$175) is due on or before July 1.
- Option 2: Full Payment (\$350) enclosed.

SIBLING DISCOUNT: 2 children - \$650 / 3 children \$930

All payments are fully refundable until July 1. Fifty percent (\$175) of the fee is refundable if notification of cancellation is made prior to July 10.

Note: If you participate in an employer provided "cafeteria plan," you may claim paid clinic fees as day care costs. Top Shelf Lacrosse Federal Tax ID#: 26-0358342

Upon receipt and approval of the participant's application and payment, the Summer Lacrosse Clinic will send a confirmation e-mail.

In addition to this confirmation, each participant will receive a Waiver & Release and a Medical Treatment Authorization Form which must be completed and returned by a parent or legal guardian.

STAFF USE ONLY

REC'D: ____ / ____

PAYMENT: \$ _____

CHECK #: _____

CONF SENT: ____ / ____

Please Make Checks Payable to: "Top Shelf Lacrosse" and return by mail to: Top Shelf Lacrosse • 188 Middle Road • Byfield, MA 01922

www.topshelflax.com