



**Sunday October 7, 2018**  
**Pickerington, Ohio**

Check-in begins at 10:30 am behind visitor stands of Tiger Stadium (located behind Ridgeview Junior High School, 130 Hill Road South, Pickerington Ohio). Game play begins at 12 PM.

**Format:** 3v3 format on a small field with one goal (one goalie). 10 minute running clock per/game. Teams will participate in round robin play before a single elimination tournament. Games will be officiated by certified officials.

**Facilities:** Games will be played **behind** Tiger Stadium on grass surface. Concessions and restroom facilities available. Parking available in several lots near stadium.

**Equipment:** Players must bring sticks, goggles, mouth guards & goalie equipment. Teams must wear similar colored jerseys/shirts. Home team listed on the schedule will be required to change if both teams have the same color jersey/shirts.

**Divisions:** Middle School (7<sup>th</sup>/8<sup>th</sup> grade) and High School (9<sup>th</sup>-12<sup>th</sup> grade)

**Teams:** Teams should consist of 4-6 **field** players. Maximum team size is 6 players.

**Goalies:** Goalies will be pooled together and assigned games based on the number of goalies that attend.

**Registration Fee:** Field players - \$45 Goalies - \$25 (*Goalies get one free short sleeved t-shirt with registration*)

Make checks payable to **Tiger Lacrosse Booster Club**.

**T-Shirts:** Tournament t-shirts can be pre-ordered with registration at a discounted price. A limited number of t-shirts will be available the day of the event.

**Register early as there is limited space available!**

Please e-mail intent to participate as early as possible then follow up with mailed registration.

Registrations must be post-marked by **September 29, 2018**.

*Walk-up registrations are not permitted due to tournament set up.*

# REGISTRATION AND WAIVER FORM

Player Name: \_\_\_\_\_ Team Name: \_\_\_\_\_

Other team members \_\_\_\_\_  
 \_\_\_\_\_

Player Grade: \_\_\_\_\_ Player School: \_\_\_\_\_ Field Player or Goalie  
circle one

Address: \_\_\_\_\_  
Street Address City State Zip

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

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

<i>Pre-order price</i>	Adult Small	Adult Med	Adult Lg	Adult XL	Adult XXL +\$2.00
Long Sleeve \$20					
Short Sleeve \$15					
<b>Total:</b>					
<i>A limited number will be available the day of the event for \$20 (short sleeve) and \$25 (long sleeve)</i>					

Registration Total	
T-Shirt Total	
Total Enclosed	\$

Credit Card #			
Exp. Date		3 digit code	

**Mail (with check or credit card info) to:**  
**Tiger Lacrosse Booster Club, PO Box 741, Pickerington, OH 43147**

**Parent Waiver:**

The activities are designed to be safe for all participants and geared toward their individual abilities. ACCIDENTS may still occur. Therefore, we are requesting that parents or guardians of each participant, check your medical insurance to verify that your child will be adequately insured in case they may suffer an injury or accident during camp activities. This event is sponsored by Pickerington Local School District.

I have investigated my insurance policy and I am satisfied that there is adequate medical insurance coverage for my child who will be attending the Tiger Girls Lacrosse 3 v 3.

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

List any medical conditions or allergies: