



**YOUR INVITED TO TRYOUT FOR  
TEAM IGLOO**



# Team Igloo Information Highlights

## 2 ELITE TRAVEL TEAMS

- 3<sup>rd</sup> Grade Boys Team
- 4<sup>th</sup> Grade Boys Team

## EQUIPMENT AND COST HIGHLIGHTS

- 100% of the funds collected goes to purchase equipment, apparel, training, league fees, balls, cones, insurance, and more for the kids.
- 0% of the funds goes towards paying coaches or for profits.
- 2 Installment payments to spread out the financial commitment
- This is a all inclusive program

## ROSTER HIGHLIGHTS

- Each Team will carry 2 goalies
- Players positions are not set in stone besides Goalies
- We will carry between 18-20 players per team

## COMMITMENT HIGHLIGHTS

- Winter Training Sessions - 14 Weeks (once a week) for 2 hours
- 7 Game Winter League (Played typically on weekends)
- Practices During the Spring and Summer will be once a week (March – July)
- 10 Game Spring League (Typically on Saturdays, so doesn't conflict with PAL)



### 2011/2012 Team Igloo Championships

Halloween Havoc Champions  
Shamrock Shootout Champions  
LI Laxfest Champions  
Hersey Laxfest Champions

*"It takes a team to build a player"*



# Tryout Information

## TRYOUT DATES

- **September 22<sup>nd</sup>, 23<sup>rd</sup>, 29<sup>th</sup>, 30<sup>th</sup>**
- **3<sup>rd</sup> Grade will be from 6PM – 7:30PM**
- **4<sup>th</sup> Grade will be from 8PM – 9:45PM**

## Tryouts will be held at Walker Park in Hicksville

**Andrews Road Hicksville, NY**

### From the East

Take the Long Island Expressway (RT 495) west to exit 41 south (rt 106/107) Head south on 106/107 for about 1/2 mile. Turn left onto Bethpage Road (behind Sear's), and make a left onto Andrews Road. The field is on the right.

### From the West

Take the Long Island Expressway (RT 495) east to exit 41 south (rt 106/107) Head south on 106/107 for about 1/2 mile. Turn left onto Bethpage Road (behind Sear's), and make a left onto Andrews Road. The field is on the right.

## COST FOR TRYOUTS - \$100 PER PLAYER

### (Includes All Four Tryout Dates)

Register for Tryouts at <http://www.igloolax.com> and follow the directions on the site for creating an account and registering for tryouts. You will need a US Lacrosse #. You can get one at <http://www.uslacrosse.org>

## WHAT TO BRING TO THE TRYOUT

- COPY OF YOUR SONS BIRTH CERTIFICATE
- TEAM WAVIER (Attached in this document)
- All equipment, cleats, cup, mouth piece, etc. )



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# WHAT YOUR SON WILL RECEIVE IF THEY MAKE THE TEAM, AND THE COSTS.

## EQUIPMENT

- New Cascade Helmet = \$150
- Full Helmet Stickers with their number = \$50
- Team Gloves = \$150
- Reversible Dye Sublimated Jersey = \$70
- 2 Pairs of Dye Sublimated Shorts = \$90
- Sweat Shirt and Pants with # = \$100
- 2 Shooting Shirts = \$100
- 2 Pairs of Socks = \$20
- 1 Reversible Practice Jersey = \$20
- 1 Lacrosse Bag = \$150
- Team Equipment fund (BALLS, CONES,ETC.) = \$70

## TEAM PLAY

- 14 (2) hour Winter Indoor Training Sessions = \$350
- 7 Winter Indoor League Games = \$130
- 10 Spring League Games = \$150
- 5 Elite Travel Team Tournaments = \$600

## A UNIQUE EXPERIENCE

- An Opportunity to play along side dedicated players and parents to the sport.
- A family oriented environment where everyone feels a part of something special and unique.
- Volunteer Coaching that is here strictly because they love the game and love coaching kids.



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# Commitment

## TIME COMMITMENT & PLAYER EXPECTATIONS

- Each Player is expected to attend all practices, games, and tournaments. We realize things do come up from time to time and will handle those occurrences on a case by case basis. Players realize that this is an elite team that plays in very competitive environments and that ***playing time will not equal.***

## PRACTICE AND PLAY COMMITMENT

- 14 Winter Indoor Training Sessions
- 7 Winter Indoor League Games
- 10 Spring League Games
- Up to 34 Winter, Spring and Summer Practices
- 5 Elite Travel Team Tournaments During the Spring and Summer

## COST COMMITMENT (2 INSTALLMENTS)

- **1<sup>ST</sup> Payment** is Due upon being notified that you have made the team and acts as your commitment to play with Team Igloo. This payment will cover the ordering of all your equipment and uniforms listed on the page before.  
*This payment is used immediately to order equipment and uniforms, this is considered none refundable.*

Amount = \$970

- **2<sup>nd</sup> Payment** is Due two weeks before the first Winter training session which covers all 14 weeks training sessions, 7 game winter league, Spring Oyster Bay League, and 5 spring/summer tournaments.

Amount = \$1,230



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# Payment Information

## **PLEASE MAKE ALL CHECKS PAYABLE TO:**

Igloo Lacrosse, Inc.  
25 Hillside Lane  
Syosset, NY 11791

## **FOR QUESTIONS PLEASE CONTACT**

Anthony Alexander  
Email: [anthony@visionqwest.com](mailto:anthony@visionqwest.com)  
Phone: 917.623.6509

John Maccarone  
Email: [johnm@maccaroneplumbing.com](mailto:johnm@maccaroneplumbing.com)  
Phone: 516.315.8864

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The Team

**WAVIER**



# WAIVER AND RELEASE BY PARENT OF MINOR CHILD FROM LIABILITY FOR LACROSSE

I, \_\_\_\_\_, on behalf

of \_\_\_\_\_  
(hereinafter referred to as "CHILD") HEREBY WAIVE AND RELEASE, indemnify, hold harmless and forever discharge Igloo Lacrosse, Inc and its agents, managers, employees, officers, directors, affiliates, successors and assigns, of and from any and all claims, demands, debts, contracts, expenses, causes of action, lawsuits, damages and liabilities, of every kind and nature, whether known or unknown, in law or equity, that I or CHILD ever had or may have, arising from or in any way related to CHILD'S participation in any of the events or activities conducted by, on the premises of, or for the benefit of, Igloo Lacrosse, Inc provided that this waiver of liability does not apply to any acts of gross negligence, or intentional, willful or wanton misconduct.

I understand that the activities that said CHILD will participate in are inherently dangerous and may cause serious or grievous injuries, including bodily injury, damage to personal property and/or death. On behalf of myself, CHILD, my heirs, assigns and next of kin, I and said CHILD waive all claims for damages, injuries and death sustained to me or my property, that I or said CHILD may have against the aforementioned released party to such activity.

CHILD has the necessary and requisite skills to participate in all facets of, and activities of and requested of this club, except as noted below. The nature of the activities has been fully disclosed and any flyer, advertisement, or brochure relating to the participating activities is expressly made a part of this WAIVER AND RELEASE. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately exercise my parental/guardianship rights and discontinue further participation by said CHILD in the activity.

By this Waiver, I, on behalf of said CHILD, assume any risk, and take full responsibility and waive any claims of personal injury, death or damage to personal property associated with Igloo Lacrosse, Inc including but not limited to receiving lacrosse lessons at the facility/club/courts, using the facility/club/courts and its equipment in any manner, form or fashion, and practicing and/or engaging in lacrosse activities, round robins, ladders, leagues, tournaments, drills or other related activities on and off the premises.

This WAIVER AND RELEASE contains the entire agreement between the parties, and supersedes any prior written or oral agreements between them concerning the subject matter of this WAIVER AND RELEASE. The provisions of this WAIVER AND RELEASE may be waived, altered, amended or repealed, in whole or in part, only upon the prior written consent of all parties. The provision of this WAIVER AND RELEASE will continue in full force and effect even after the termination of the activities conducted by, on the premises of, or for the benefit of, Igloo Lacrosse, Inc whether by agreement, by operation of law, or otherwise.

I have read, understand and fully agree to the terms of this WAIVER AND RELEASE. I understand and confirm that by signing this WAIVER AND RELEASE said CHILD and I have given up considerable future legal rights. I have signed this Agreement freely, voluntarily, under no duress or threat of duress, without inducement, promise or guarantee being communicated to me. My signature is proof of my intention to execute a complete and unconditional WAIVER AND RELEASE of all liability to the full extent of the law.

Medical Conditions. CHILD is subject to the following allergies or medical conditions, and I authorize the facility to disclose these conditions to a physician or other medical professional in the event said CHILD should require emergency medical care:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Prohibited Activities. As a result of the above-mentioned medical conditions, I, on behalf of said CHILD, am prohibiting involvements in the following specific activities:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**(Date)**

\_\_\_\_\_  
**(Printed Name of CHILD)**

\_\_\_\_\_  
**(Printed Name of "Parent/Guardian")**

\_\_\_\_\_  
**(Signature of "Parent/Guardian")**