

MILTON LADY EAGLES



**“Five Time” State Champions
2005, 2006, 2007, 2008, 2010**

The Milton Girl’s lacrosse program is the most successful program in Georgia. The program won 4 consecutive State Championships from 2005 – 2008 and were a finalist in 2009. After a rebuilding year in 2009, the Eagles re-claimed their crown in 2010.

The Milton program has produced more collegiate level players than any program in the state and many of the players began their careers learning instruction at the Camp of Champions. During the past four seasons, the Milton program has produced more All-American and All-State players than any other program.

Milton’s Camp of Champions has greatly contributed to the success of the Milton program. The instruction the girls receive at camp, along with a fun and positive atmosphere, helps the girls learn and enjoy the game and want to continue to participate in the sport. Each camper will receive excellent instruction from the Milton coaching staff as well as current and former All-State, All-American, college, and high school players. It is our goal to provide a fun, positive, and enthusiastic teaching environment to help the campers learn and develop their skills so they become a better lacrosse player.



Milton Lady Eagles Lacrosse Camp

LOCATION

**Alpharetta North Park
13450 Cogburn Rd.
Alpharetta GA 30004**

**For more information Contact:
Coach Tim Godby
770-378-2494
LadyEaglesLax@yahoo.com**

For additional flyers and information, go
to:

www.EagleStixLacrosse.com

MILTON LACROSSE

*Lady Eagles
Camp of Champions*



*“Five Time” State Champs
2005, 2006, 2007, 2008, 2010*

Session 1: June 6 – 9

Rising Grades 1-9 all levels of experience
Grades (1-4) 8:30am – 11:00am
Grades (5-9) 9:00 – 12:00

Session 2: June 27 – June 30

Rising Grades 1-9 all levels of experience
Grades (1-4) 8:30am – 11:00am
Grades (5-9) 9:00 – 12:00

**Beginners or Experienced
Players are Welcome**



Camp Features and Highlights...



- Excellent instruction from Lady Eagles team members and coaches
- Instruction from current and former All-State and All-American players
- Lacrosse Camp T-shirt
- Full field scrimmages and game Competitions
- "Money Time" – opportunity to win money and prizes
- Campers grouped by age and skill level
- Daily competitions for prizes



SKILL INSTRUCTION

Passing	Dodging
Catching	Defense
Ball control	Stick work
Shooting	Goalie play



WHAT TO BRING

Lacrosse stick	Mouth guard
Goggles	Cleats/shoes
Water	Sunscreen



CAMP FEES

Session 1 June 6 – 9

(Grades 1 – 4) = \$145

Late Reg. fee after May 30 = \$155

(Grades 5 – 9) = \$165

Late Reg. fee after May 30 = \$175

Session 2 June 27 – July 30

(Grades 1 – 4) = \$145

Late Registration after June 20 = \$155

(Grades 5 – 9) = \$165

Late Registration after June 20 = \$175

- *Discount for multiple sessions and siblings = \$20*
- *\$15 rental fee (stick and goggles)*

Make checks payable to:

Milton Lacrosse

Send applications to:

Eagle Stix Lacrosse Camp
 980 Birmingham Rd. Ste 501-311
 Milton GA 30004



REGISTRATION

Name: _____

Address: _____

City: _____ State: ____ Zip: ____

Home Phone: _____

Cell Phone: _____

Email: _____

School: _____

Grade in Fall 2011: _____ Age: _____

Experience: beginner, 1 year, 2+ years

My daughter will attend camp session(s)

June 6 – 9 _____ June 27 – June 30 _____

Both #1 and #2 _____

T-Shirt Size, Please circle size:

Youth: Medium, Large

Adult Small, Medium, Large

PARENTAL PERMISSION AND CAMP WAIVER/RELEASE

By participating in the Milton Lacrosse Camp I will be waiving and releasing all claims for injuries that my daughter may sustain in this camp. I recognize and acknowledge that there are certain risks of injury, damages, or loss which may occur in any and all activities connected with or associated with this camp. I do fully release and discharge the Milton Lady Eagles Lacrosse Camp, its coaches, and supervisors and Fulton County Schools from any and all claims resulting from injury, damages and losses sustained by my daughter and the activities of the program.

I hereby state that my daughter is physically fit and may participate in all activities. I also grant permission to have my child treated by a physician if necessary.

Parent/Guardian _____

Signature _____

Date _____