

MERESTEAD SPORTS CAMP, INC 2009 COACHES CLINICS

FIELD HOCKEY ♦ LACROSSE

Phone/Fax: 804-440-9551 Email: info@merestead.com Web: www.merestead.com

VA-Sweet Briar
June 21-24
RMC July 6-8
(FH only)

MN-St. Joseph
July 5-8

PA-Bryn Mawr
July 19-22

WHO: MIDDLE School, JUNIOR High School and HIGH School Coaches.

PROGRAM TAILORED to YOUR NEEDS

♦ **WATCH** camper session ♦ **OBSERVE** coaches in action ♦ **SHARE** ideas with staff coaches

Each site has a mixture of middle, high school and college coaches who are US and International. You will have both classroom and practical application in techniques, tactical, conditioning and motivation. Each sport has its own staff.

Merestead Sports Camp is officially sanctioned by NFHCA and the United States Field Hockey (and recommends for Futures)

FEES

RESIDENT: *Clinic participants will be housed with the coaching staff, not campers.*

BOTH SPORTS: \$ 450.00 - ALL MEALS AND ROOM plus COACHING MATERIALS

ONE SPORT: \$ 400.00 - ALL MEALS AND ROOM plus COACHING MATERIAL for SPORT

DAY: *8:30 am to 8:30 pm daily*

BOTH SPORTS: \$ 325.00 - INCLUDES LUNCH & DINNER plus COACHING MATERIALS

ONE SPORT: \$ 300.00 - INCLUDES LUNCH & DINNER plus COACHING MATERIAL for SPORT

COACHES WITH TEAMS AT CAMP RECEIVE A 10% DISCOUNT

DEADLINE: JULY 1, 2008. Space is limited to 10 for the course(s), so please sign up now!

QUESTIONS Contact: Director, **Missy Ackerman** PHONE: 804-440-9551,

EMAIL: info@merestead.com

TO REGISTER: Send application and deposit \$200.00 (\$100 non-refundable) to
MERESTEAD SPORTS CAMPS

P.O. Box 9278 Richmond, VA 23227

phone 804-440-9551 fax 804-767-1161 info@merestead.com



MERESTEAD SPORTS CAMP, INC 2009

COACHES' CLINIC APPLICATION

PRINT: First name _____ Last name _____
Street address _____
City _____ State _____ Zip code _____
Home phone (_____) _____ Work phone (_____) _____ Email _____
School Name & Address where you coach _____

SITE: check options

VA June 21-24 MN July 5-9 PA July 19-22 VA July 6-8 FH Only Team Camp Clinic

COURSE: check one box

HOCKEY & LACROSSE HOCKEY ONLY LACROSSE ONLY

LEVEL & SPORT: indicate level and sports you coach

middle or junior high school hockey lacrosse Years of coaching experience: _____ hockey _____ lacrosse
 high school JV hockey lacrosse State any specific requests for the coaching clinic _____
 high school varsity hockey lacrosse

(Continue on reverse side)

STATUS Resident or Day Shirt Size: (female adult sizes) circle size MED LRG XL XXL

For ROOMING arrangements please indicate: female male

FEES: BOTH SPORTS: \$455.00 Res., \$325.00 Day ONE SPORT: \$395.00/\$295 Res., \$300.00/\$250 Day FH Team Camp \$325 res/\$250 day

Send application & deposit \$200.00 or full fee to:

MERESTEAD SPORTS CAMPS

P.O. Box 9278

Richmond, VA 23227

METHOD OF PAYMENT: Check enclosed Master Card Visa Amex Discover

Credit Card Number _____

V Code _____ Exp Date _____

Amount \$ _____ Print Name _____ Signature _____

required for credit card payment

Please provide address for credit card if different from registration.

