

**Grayson High School  
Girls Lacrosse  
Forms**

**Varsity  
Junior Varsity**



**Please print this packet and turn into head coach. This packet must be completed along with a current physical prior to January try outs.**

### Coaches Emergency and Contact Information

This information will be kept *confidential* and will only be available to the coaches. Please be as detailed as possible so we can keep your players safe and secure!

Player Name	
Student #	
Player Cell #	
Player email	

Years experience in lacrosse?		Last year's # on your team?	
What is your experience in lacrosse? (Teams, positions, etc.) Be as detailed as possible!			
Your lacrosse goals (positions, playing, and performance) for this year			
Medical Conditions of which the coaches should be aware? (Please include any allergies!)			

Parent Guardian Name		Parent Guardian Name	
Cell #		Cell #	
Work #		Work #	
Home #		Home #	
Address		Address	
Email		Email	

Emergency Contact in case parents cannot be reached:

Name		Relationship	
Phone #		Alt. Phone #	

## Alternative Transportation Liability Form

Gwinnett County Public Schools/ Grayson High School (name of school) is not always able to provide transportation for students to off campus extracurricular school activities. In cases when transportation is not provided by Gwinnett County Public Schools/ Grayson High School (name of school) as in the use of a school bus or charter bus, it is the responsibility of the student's parents or guardian to secure their student's attendance at such activities. Gwinnett County Public Schools, its local schools, officers, employees or agents shall not be responsible for any injury or loss arising out of a student's transportation to or from the off campus activity when such transportation is provided by parents, students, school staff or any other party. Your signature acknowledges your receipt of and understanding of this policy.

\_\_\_\_\_  
Student's Name (Student #)

Varsity/JV Lacrosse  
Activity

\_\_\_\_\_  
Date of Activity (Feb – May, then add year)

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

## Parent Directory (Phone Tree) and Volunteer Info

The information below will be compiled onto a team directory so that phone trees and contact sheets can be distributed. This information will also be used by the booster club to contact volunteers, committee members, and to share information about upcoming games, events, etc.

Player Name	
Player Cell # (best reached at)	
Player email	

Parent / Guardian		Parent / Guardian	
Cell #		Cell #	
Home #		Home #	
Address		Address	
Email		Email	

**I understand that this information will be compiled into the team directory and agree to release it as such.**

\_\_\_\_\_

Parent Name – please print

\_\_\_\_\_

Parent Signature

\_\_\_\_\_

Date

\_\_\_\_\_

## Concessions Duties

Concessions are a vital part of the fundraising to support our program. Every parent is expected to serve at least once in the concessions stand. A schedule will be made that will try to allow you not to miss your player(s) games. This schedule will be compiled and shared early in the season. If you are unable to make your scheduled concessions duty, it is YOUR RESPONSIBILITY to find a replacement or switch with another parent and then CONTACT THE CONCESSIONS DIRECTOR. In order to emphasize this, we ask for a **\$50 Concessions Deposit check** at the beginning of the season. We will hold these *uncashed* until the end of the season and return them once your Concession Duty has been fulfilled.

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As a parent I would like to get more involved with the team and booster club. Please contact me regarding the following duties and committees.

_____ Fundraising	_____ Spiritwear	_____ Field Setup/Takedown	_____ Announcing
_____ Senior Night	_____ Banquet/Events	_____ Field Prep	_____ Programs
_____ Team Mom(s)	_____ Team Snacks	Anything Else?? _____	_____

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Parent Name – please print

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Parent Signature

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Date

### Acceptance of Team Policies

*Please sign, date, and return to the coach.*

I have read and understood the Grayson High School Varsity/Junior Varsity Handbook and agree to abide by the policies as put forth within it. I understand that I am a part of a team and will endeavor to conduct myself as such. I commit to:

- Give 100% effort at all times.
- Give early notice when necessary to miss practice or games for acceptable reasons.
- Be on time to practices, games, and meetings.
- Always come prepared to every game and practice with my stick, goggles, mouthguard, and proper attire. My stick will be legal for use on the playing field.
- Listen when the coaches are giving instructions
- Not use foul language or engage in dangerous horseplay.
- Show respect to my coaches, teammates, officials, and opposing players.
- Speak in a positive manner at all times and maintain an attitude of good sportsmanship.
- Make academics my number one priority so that I represent my team in an honorable manner.
- Work hard and have fun while playing lacrosse with my teammates.

\_\_\_\_\_  
Student Name – please print

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

I have gone through the Grayson High School Varsity/Junior Varsity Handbook with my student and understand the policies as put forth within it. I will support the coaches and my student as well as the team throughout the season.

\_\_\_\_\_  
Parent Name – please print

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
*For records only*

Booster dues paid (date) \_\_\_\_\_ (check #) \_\_\_\_\_

Concessions deposit (date) \_\_\_\_\_ (check #) \_\_\_\_\_

Uniform deposit (date) \_\_\_\_\_ (check #) \_\_\_\_\_