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**2024-2025**

# **BOYS LAX SKILLS CLINIC**

Professional instruction from Superdome coaches experienced at developing great LAX players. Develop and refine fundamentals key to success, including:

- Stickwork (basic and advanced)
- Defensive technique
- Attack tactics
- Face-offs

Buy 1 get  
**50% OFF**  
The second class  
Call front office  
for details

## **DATES**

**Tuesdays, 8 sessions**

**Fall I:** September 3<sup>rd</sup> - October 22<sup>nd</sup>

**Fall II:** October 29<sup>th</sup> - December 17<sup>th</sup>

**Winter I:** December 31<sup>st</sup> - February 18<sup>th</sup>

**Winter II:** February 25<sup>th</sup> - April 15<sup>th</sup>

**Spring I:** April 22<sup>nd</sup> - June 10<sup>th</sup>

## **TIMES**

**Grades 2 to 5:** 4:00-5:00pm

**Grades 6 to 8:** 4:00-5:00pm

## **COST**

\$265

## **LOCATION**

Waldwick



Superdome Waldwick: (201) 444-7660  
[info@superdomesports.com](mailto:info@superdomesports.com) | [www.superdomesports.com](http://www.superdomesports.com)

# 2024-2025 BOYS LAX SKILLS CLINIC

## REGISTRATION FORM

Parent's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Participant's Name _____	Age _____	Grade _____	Years Experience (if any) _____	Position _____	
<input type="checkbox"/> Fall I	<input type="checkbox"/> Fall II	<input type="checkbox"/> Winter I	<input type="checkbox"/> Winter II	<input type="checkbox"/> Spring I	<input type="checkbox"/> Grades 2-5 <input type="checkbox"/> Grades 6-8
					FEE: \$265

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<input type="checkbox"/> Fall I	<input type="checkbox"/> Fall II	<input type="checkbox"/> Winter I	<input type="checkbox"/> Winter II	<input type="checkbox"/> Spring I	<input type="checkbox"/> Grades 2-5 <input type="checkbox"/> Grades 6-8
					FEE: \$132.50

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					FEE: \$132.50

TOTAL: \_\_\_\_\_

**NO CLEATS**  
Turf shoes or sneakers only

Full equipment required: stick, goggles, mouthpiece.

- Credit Card  Check  Cash
- Mastercard  Visa  American Express  Discover

Card Number: \_\_\_\_\_ Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_

Billing Address \_\_\_\_\_ Zip \_\_\_\_\_

Cardholder Name \_\_\_\_\_ Cardholder Signature \_\_\_\_\_

Make checks payable to "Superdome Sports" and mail to address below.

Each player must submit a completed online waiver prior to play. Available at [superdomesports.com/waivers](http://superdomesports.com/waivers)

