

**ELITE**  
**SHOOTING & GOALKEEPER**  
**TRAINING**  
SATURDAY | MARCH 3<sup>RD</sup>



**GAMEDAY**  
**SHOWCASE**  
SUNDAY | MARCH 4<sup>TH</sup>

**2018 DAVIDSON LACROSSE ELITE TRAINING & GAMEDAY SHOWCASE**

**WHERE:** Richardson Stadium - 200 Baker Dr. Davidson, NC 28035

**ELITE TRAINING SESSION**

**WHEN:** Saturday, March 3<sup>rd</sup> | 6PM-8PM

**COST:** \$85 **OPEN TO:** Grades 8-12

**LIMITED SPACE AVAILABLE!**

*First 10 shooters & 10 goalkeepers to sign up will receive spots!*

5:45PM-6:00PM – Registration

6:00PM-7:00PM – GK Training Session

*Lead by Assistant Coach Lily Carpenter*

6:00PM-7:00PM – Shooting / Dodging

*Training Unique Shooting Drills with Head Coach Kim Wayne*

7:00PM-8:00PM – Live Shooting Drills with GKs

**GAMEDAY SHOWCASE**

**WHEN:** Sunday, March 4<sup>th</sup> | 9AM-3PM

**COST:** \$125 **OPEN TO:** Grades 8-12

8:45AM-9:00AM – Registration

9:00AM-9:10AM – Warm UP

9:10AM-9:30AM – Stickwork Session

9:30AM-9:40AM – Talk Through Box Concepts

9:45AM-10:45AM – Box 3v3 Tournament

10:45AM-11:30AM – 7v7 Scrimmages

11:30AM-12:30PM – Campus Tour

*Lead By Former Wildcat, Nicole Petiglio*

12:30PM-1:00PM – Lunch (*Sandwiches Provided*)

1:00PM-3:00PM – GAME TIME! *Davidson vs Mercer*  
*Go 'Cats!*

Attend BOTH camps for \$200 | Select Attendance Option Below:

Elite Training ONLY: GK \_\_\_ FIELD PLAYER \_\_\_

Gameday Clinic ONLY: GK \_\_\_ FIELD PLAYER \_\_\_

Training & Clinic: GK \_\_\_ FIELD PLAYER \_\_\_

**WHAT TO BRING:** Please bring a water bottle and something to eat if you cannot eat sandwiches. Bring turfs OR cleats, AND sneakers to walk around in for the campus tour.

Name \_\_\_\_\_ Player Email \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_ Grad Year \_\_\_\_\_ High School \_\_\_\_\_

Position \_\_\_\_\_ Club Team \_\_\_\_\_

By signing this application, I release Davidson College, Davidson's Women's Lacrosse, and other involved parties from any claims or responsibility for injuries suffered in the clinic/league. I knowingly assume all risks associated with participation, even if arising from negligence of the participants or others, and assume full responsibility for my participation. I certify that I am in good physical condition and can participate in the NoCar Elite Training and/or Gameday Showcase.

Athlete \_\_\_\_\_ Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Make checks payable to: NoCar Lacrosse, LLC**

Mail checks to: Davidson Lacrosse - Baker Sports Complex

Box 7158. Davidson, NC. 28035 OR register online at: [www.davidsonlacrossecamps.com](http://www.davidsonlacrossecamps.com)

Contact Lily Carpenter - [licarpenter@davidson.edu](mailto:licarpenter@davidson.edu) / 704-894-2086 for any questions.