

OHIO WESLEYAN LACROSSE

WINTER PROSPECT CLINIC

SUNDAY, FEBRUARY 19th

WINTER PROSPECT CLINIC

Join Ohio Wesleyan coaches and current student-athletes on Feb. 19th for an afternoon of skill development and competitive game play. Learn more about what it is like to be a student-athlete at OWU!

Recommended for high school aged players graduating in 2023, 2024, 2025, & 2026.

TENTATIVE SCHEDULE

11:00 AM	Admissions Campus Tour (<i>Optional</i>)
12:15 PM	Registration at Selby Stadium
12:30 PM	Instructional Session/Game Play
2:30 PM	Tour of Athletic Facilities/Lacrosse Info Session

Stay on Monday for a full visit day!

Contact Head Coach, Paige Messersmith for more information at plmessersmith@owu.edu



February
19th



12:30-2:30 PM



Selby
Stadium



\$60

REGISTER ONLINE

bishopslacrosseccamps.com

MAIL IN REGISTRATION

Name: _____ Date of Birth: _____ HS Grad Year: _____

Address: _____

Email Address: _____

Years of Experience: _____ Position: _____

High School / Club Team: _____ / _____

PLEASE MAKE CHECKS PAYABLE TO OHIO WESLEYAN UNIVERSITY

Women's Lacrosse- Attn: Paige Messersmith - 61 S Sandusky St. Delaware, OH 43015



**Ohio Wesleyan Athletic Facilities
Individual Waiver Form**

Today's Date: _____

Name: _____ Date of Birth: _____

Phone: _____

EMERGENCY CONTACT

Name: _____ Phone: _____ Relationship: _____

In consideration of any and all participation in the Department of Athletics programs and activities, including use of facilities and equipment, the undersigned agrees and understands that risk of serious and permanent injury from the activities does exist, and knowingly and freely assumes all risks, both known and unknown, even if arising from the negligence of the Department or others and assumes full responsibility for participation and use of all facilities. The undersigned further agrees to comply with the stated and customary terms and conditions of participation and agrees that if any unusual or significant hazard is observed, activities will be discontinued and the undersigned will bring such matter to the attention of the nearest official immediately. I, for myself and on behalf of my heirs, assigns, personal representative and next of kin, hereby release and hold harmless Ohio Wesleyan University, its Board of Trustees and officers, agents and/or employees, with respect to any and all injury, disability, death, or loss or damage to person or property which I may incur to the fullest extent permitted by law.

X _____
Signature Date

X _____
Parent/Guardian Signature (If under 18 years of age) Date