

2nd Annual Homer Alumni Lacrosse Weekend



Dear Homer Lacrosse Alumnus:

The Homer Boy's Lacrosse Booster Club will be conducting the second annual Homer Alumni Lacrosse Weekend, July 16-17, 2010. We invite all Homer lacrosse alumni back to George W. Butts Field to participate in an alumni game at 12 noon on Saturday, and a family get-together/picnic following the game. In addition, as a fundraiser, the Booster Club will be sponsoring an 18-hole golf outing on Friday, 7/16, at Elm Tree Golf Course. Lunch and registration will be from 12:00 noon – 12:45, with golf beginning at 1:00 PM sharp.

All activities will be open to any interested lacrosse alumni who have pre-registered. Please see the attached form that will allow individuals to register for **any or all activities**, including a foursome for golf on Friday, 7/16, the alumni lacrosse game on Saturday 7/17 (Noon), and the family get-together/picnic. The form is also available at www.homerlacrosse.com.

Please follow the directions on this form and mail to:

Tammy Demeree
P.O. Box 54
Homer, NY 13077

If you have any questions regarding the weekend, please email Rich Cecconi: rceconi2@gmail.com, Rob Gray: rob@pilot-consulting.com Brad Roos: broos@macgray.com Tammy Sciera: tsciera@twcny.rr.com Tom Cottrell: tcottrell@homercentral.org

**2nd Annual Homer Alumni Lacrosse Weekend 2010
Registration Form**

Alums: Please fill out the registration form and send it to:
Tammy Demeree, PO Box 54, Homer, NY 13077
Checks payable to: Homer Lacrosse Booster Club

Name: _____ Home Phone _____
Address _____ Cell Phone _____
_____ E-Mail _____

If you are registering for our Alumni Golf Outing, please list your foursome and captain's name and enclose a check for \$55.00 for your golf fee. It is \$55.00/person. When 2 of your 4 team members send in their check, your team spot will be reserved. If you wish to pay for all four members, send a check for \$220.00 and your team will be registered immediately. Only 25 teams will be accepted due to Elm Tree's limitations. Please enter your team ASAP.

Team Captain: _____
Name E-Mail Address
Member 2: _____ Member 3: _____
Member 4: _____

If you plan on participating in the Alumni Lacrosse game, please sign the waiver below.

I _____ will participate in the Home alumni lacrosse game on Saturday, July 17 of my own free will and will hold no one responsible for any injury that may occur as a result of said participation.

Signature

If you plan to attend the Alumni Lacrosse Picnic/Family Get-together, please let us know how many adults (11 years or older) as well as children under 10 will be attending. Adults are \$10.00 each, and children 10 and under are \$5.00/child.

_____ Adults _____ Children Amount enclosed: _____

Please return this form ASAP. **Registration deadline is July 10. Caterer must know numbers by this date – no exceptions.** We will email you an acknowledgement of your form and payment as soon as it is received.

