



Instruction Sheet Adult

THANK YOU for requesting membership forms! We very much appreciate your participation in our membership program. With your support and involvement US Lacrosse can achieve its mission and vision.

To insure all membership applications are processed in a timely and efficient manner, please adhere to the following guidelines:

- All forms **MUST** be signed correctly! (18 and over requires participants signature, under 18 requires a parent signature) Signatures are most critical. Membership applications will not be processed without a signature, which means no insurance.
- A completed **roster**, program/team name, contact person, address and telephone number must accompany returned forms and total payment. Any discrepancies in membership status will not be the responsibility of US Lacrosse if a roster is not submitted.
- Legibly printed forms in blue or black ink will be processed faster.
- One check from your organization must be enclosed. The number of forms and their membership category should equal the amount of the check. Use the chart below to assist you in your organization. Forms with partial payment will not be processed. **Applicants do not have insurance until full payment is received.**
- Forms should be divided by type of membership (players, coaches, etc.).
- **Faxed forms are not permitted and will not be processed!**

The Membership Department is here to assist you with other questions or concerns. Feel free to contact the Membership Department at 410.235.6882 x102 or membership@uslacrosse.org. Again, thank you for your support of US Lacrosse. Your dedication is critical to the growth of the sport!

Program Administrator Check List (*Did you remember to...*)

- make sure all the forms are signed correctly, (under 18 requires a parent signature)?
- divide the forms into separate membership categories?
- complete the information grid at the bottom of this sheet accurately?
- make sure payment enclosed matches the correct payment due?
- include an accurate roster with the names of the players included with this submission?
- include any and all contact information and supply one, consistent team name for the group?
- enclose a cover sheet with any important information you would like us to know?
- request a list of names after the group is processed if you need one?

A ROSTER IS KEY IN ACCURATELY PROCESSING THE FORMS!!!

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1. Team Name / League: _____ 5. Phone: _____
 2. Contact: _____ 6. E-mail: _____
 3. Position: _____
 4. Address: _____ 7. Check if you would like membership numbers e-mailed to you after applications are processed.

_____	x	\$45	=	_____
9. Number of Adult Players		Cost		Total Cost of Adult Forms
_____	x	\$35	=	_____
10. Number of Assistant Coaches		Cost		Total Cost of Assistant Coach Forms
_____	x	\$50	=	_____
11. Number of Head Coaches		Cost		Total Cost of Head Coach Forms
_____	x	\$65	=	_____
12. Number of Cross Participants		Cost		Total Cost of Cross Participant Forms
8. _____				_____
Total number of forms				Total Cost of all Forms

INSTRUCTIONS FOR EACH NUMBER ON CHART

(1) Team Name: The consistent name used when submitting all membership forms, requesting a certificate of insurance or requesting a list of players and membership numbers.

(1b) League: Also the consistent name...

(2) Contact: Name of the person submitting the packet of forms that we can contact in the event there is a problem with the reconciliation of the group.

(3) Position: The role you hold with in your team: president, treasurer, parent volunteer, etc.

(4) Address: Where we can mail future correspondence such as the Program Administrator thank you mailing.

(5) Phone: Number we can reach you at during the day to resolve any issues with your group.

(6) Email: E-mail address we can send you a confirmation we received your group and where we will send a list of membership numbers once the applications have been processed.

(7) Check Box: (Check if you would like membership numbers e-mailed to you after applications are processed) select this box if you would like to have an updated list of membership numbers e-mailed to you. The list would include any current members previously submitted and the applications submitted with this instruction sheet.

(8) Total Number of Forms and Cost: Add up each of the columns in the grid and these are the final numbers that should be equal to what is included in the package.

(9) Number of Adult Players: Total number of players 15-18 years old and in high school.

(10) Number of Assistant Coaches: Total number of coaches that would not be classified as a head coach.

(11) Number of Head Coaches: Total number of head coaches.

(12) Number of Cross Participants: Total number of members who belong to more than one membership category, for example a head coach and an official, or an adult player and an assistant coach.



Team Name / League: _____ ① Contact: _____ ② Position: _____ ③ Address: _____ ④ _____ _____ ⑨ Number of Adult Players x \$45 = _____ ⑩ Number of Assistant Coaches x \$35 = _____ ⑪ Number of Head Coaches x \$50 = _____ ⑫ Number of Cross Participants x \$65 = _____ ⑧ Total number of forms	Phone: _____ ⑤ E-mail: _____ ⑥ <input type="checkbox"/> Check if you would like membership numbers e-mailed to you after applications are processed. ⑦ _____ Total Cost of Adult Forms _____ Total Cost of Assistant Coach Forms _____ Total Cost of Head Coach Forms _____ Total Cost of Cross Participant Forms _____ Total Cost of all Forms
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