

CAPISTRANO VALLEY HIGH SCHOOL

26301 Via Escolar, Mission Viejo, CA 92692

GIRLS LACROSSE

Head Coach: Ryan Gustafson

rrgustafson@capousd.org

Assistant Coach: Andy Stratton



2018 PLAYERS PACKET

We are very excited about the upcoming season. Our goal is to make the season positive, fun and memorable for the girls and everyone involved. In order to make that happen, we all need to work together. The coaches, athletic director and Booster Club Board have been working hard the past few months to prepare for the upcoming season. Now, we need your help! There are many ways for you to volunteer and make Girls Lacrosse a successful and fun program!

At least one parent/guardian for each team member must attend the MANDATORY Parents Meeting on February 21st at 7:00pm in Cougar Hall.

In addition, there are a number of forms attached below. **Please print and complete** each form before the meeting (some require info from your daughter) and bring them with you to the Parents Meeting.

- ☐ Voluntary Player Donation Forms
- ☐ Code of Conduct Form
- ☐ Player Information Form / Uniform Replacement Reimbursement Agreement
- ☐ Self Transport Form
- ☐ Secret Sister Form

Athletic Clearance Forms are needed before your daughter can practice. If you have not filled these out yet, the Athletic Clearance Forms may be obtained from the team website <http://www.capoathletics.com/athleticclearance>.

We need everything completed and submitted on **February 21, 2018** to ensure proper processing before the season starts. We will cover any questions at the meeting. There is still a lot to be done before the season starts. Volunteer openings will be discussed at the meeting. We need everyone to help where they can to make the season and overall experience a success for the girls.

Thanks,

Coach Gustafson (Head Coach/Varsity Coach)

Coach Stratton (Assistant Coach)

CVHS Girls Lacrosse Booster Club Board

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Capistrano Valley High School Girls Lacrosse Athletic Team 2018

We hope you and your daughter are excited for this great season! CVHS Girls Lacrosse Boosters Association is responsible for overseeing the team's financial activities and **the primary source of the team's financial support is through voluntary player donations.** Your involvement and voluntary financial contribution is crucial to its success. All voluntary donations made will help us reach our season program goals and will fund the following items for our athletes: uniforms, practice shirts, equipment, tournament fees, coaching stipends, field maintenance, game officials, team-bonding/team-building activities, insurance, team supplies and team banquet and awards. **Athletes who are participating in the 2018 Girls Lacrosse program are encouraged to support the team with a voluntary donation of \$450.**

Athlete's Name _____

Parent's Name _____

Parent email _____

Please check all that apply:

I wish to give a voluntary player donation of \$450.

Donation payment options:

☐ \$450 - check made out to "**CVHS Girls Lacrosse Booster Club**". Please write your daughter's name on the memo line of your check.

☐ Donation Payments over next three months. (Please talk to CVHS GLAX Treasurer, Suzanne Alvarez)

☐ Our family will donate by participating in fundraising activities (please see attached fund raising packet):

- Purchase gift cards through www.shopwithscrip.com Enrollment code: 9E1B144727717. Contact Sharon Scoles to get Setup. Sharon Scoles, Former GLAX parent, Scrip Coordinator [949-244-7893](tel:949-244-7893), sskoal@cox.net

- Make internet purchases through the online shopping mall at www.escrip.com with a registered credit card to earn funds for the team.
- Banner sales

☐ We are able to make an additional voluntary team donation of \$_____.

☐ My company will or I have identified a sponsor to either make a donation (many companies have matching programs)

☐ We would like to speak to someone about other options for donations/fundraising.

☐ I wish to volunteer during the season to help our team (details to follow)

I understand that our active involvement and voluntary player donation is crucial to the success of this quality program. I also understand that the suggested voluntary donation is based upon the proposed booster club budget which includes the services and benefits that we as a booster organization would like to provide for our athletes. I also understand that if there are not enough funds collected to cover the team expenses, items from the budget will have to be eliminated and this will affect the success of the program. The Budget is available to review upon request.

Parent Signature _____ Date _____

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Note: CVHS Girls Lacrosse Boosters is a not for profit organization and all voluntary donations are tax deductible.

Capo Valley HS Girls Lacrosse Pledge Form (1 of 2)

The Capistrano Valley High School Girl's Lacrosse program needs your assistance. We are a self funded program of Capistrano Valley High School, meaning that in order to field a team and compete in the South Coast League, we need to raise the money needed to field a girls lacrosse program. Capistrano Valley High School Girl's Lacrosse Booster Association was created to help with the fundraising efforts. We do this in many way, such as fundraisers (Christmas tree sales, dinner night outs, snack bar), corporation gifts and from the parents of the players. It costs approximately \$16,000 dollars a year to fund the program and pay for things such as coaching salary, equipment, tournaments, uniforms, awards and refs.

There are many ways that you can assist. You can pledge and donate money and/or you can donate your time. This year, we are starting a Stepped Donation program.

To be a Cougar Booster, you can pledge and donate \$450 or above. If you become a Cougar Booster, you get a parking spot and preferred seating at the home lacrosse games. (parking spot is located on the beautiful Capo campus while sit where you want in the wonderful stands)

To be a Cougar Supporter, you can pledge and donate \$350 or above and donate of your time by pledging 2 shifts at the snack bar.

We realize that times can be tough for families, so you can spread out payments over time.

Level	Donation Amount	Volunteer Time
Cougar Booster	\$450>	0 Hours*
Cougar Supporter	\$350>	4 Hours**

*...While no time is required, if you would like to volunteer, it would be greatly appreciated

**...Any additional volunteer time would be greatly appreciated

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Capo Valley HS Girls Lacrosse Pledge Form (2 of 2)

Donor Information (please print)

Name _____

Billing address _____

City, ST Zip Code _____

Phone 1 | Phone 2 _____

Fax | Email _____

Pledge Information

I (we) pledge a total of \$_____ to be paid: ☐now ☐monthly ☐quarterly ☐yearly.

I (we) plan to make this contribution in the form of: ☐cash ☐check ☐credit card ☐other.

Credit card type | Exp. date _____

Credit card number _____

Authorized signature _____

Gift will be matched by (company/family/foundation) ____

Acknowledgement Information

Signature(s) Date

Please make checks, corporate matches,
or other gifts payable to:

Grizli777
26301 Via Escolar
Mission Viejo, CA 92692

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Code of Conduct

1. Student-athletes are afforded the privilege of participating in the athletics program at Capistrano Valley High School. With this privilege comes responsibility. Student-athletes will abide by the policies of the Athletic Department, the direction of the coaching staff and will contribute an atmosphere of respect and mutual support.
2. As a Capistrano Valley High School athlete, you are first and foremost a student. As a student-athlete, you are expected to fulfill certain expectations. Among these are understanding that:
 - Capistrano Valley High School is a distinguished school.
 - Earning a High School diploma is your primary goal.
 - Regular class attendance is expected.
 - Complying with Sea View League rules is your responsibility.
 - You represent Capistrano Valley High School, the Athletic Department and your team at all times and each is judged by your actions.
 - You are expected to make a commitment to academics and athletic integrity.
3. Student-athletes will treat all players, opponents, coaches, officials and spectators with respect and courtesy at all times.
4. Student-athletes will respect and comply with the directions and decisions of their coaches.
5. Student-athletes who have questions or concerns regarding directions and decisions will address the coach in private.
6. Student-athletes will abide by the training rules established in each program to achieve their full potential.
7. Student-athletes will respect the achievements of the opponent. They should extend appreciation to those who made the athletic contest possible.
8. Student-athletes will positively contribute to the total high School Athletic Program of Capistrano Valley High School. Each individual athlete will assist with program tasks and will provide an attitude of positive support and good will while performing these duties.

Signed:

Student-Athlete: _____ **Date:** _____

Parent: _____ **Date:** _____

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CAPISTRANO UNIFIED SCHOOL DISTRICT
San Juan Capistrano, California

PARENT/GUARDIAN PERMISSION FORM Student-Arranged Self-Transport to an Off-campus Activity

Under my guidance, I hereby give permission for my child, _____, to arrange his/her own transportation to/from the activity/sport as listed below, or to voluntarily drive his/her own vehicle. I understand that when my child arranges his/her own transportation or voluntarily drives to/from any activity or event, Capistrano Unified School District is not liable for any injuries or harm which may occur during the time he/she is being transported or voluntarily driving to or from the activity (Education Code Section 44808). I understand that California law requires vehicles to be insured and that all drivers carry a valid driver's license. I agree that my child will not be allowed to transport other students to /from any school function.

Name of Activity/Sport: _____

Date(s) and/or Season of Activity/Sport: _____

This permit will expire at the conclusion of the above dates and will be revoked if the student is found transporting other students.

By my signature below, I agree to waive all claims against the District and to indemnify and hold the District, its officers, agents and employees, harmless from any and all liability or claims, demands, losses, causes of action, suits or judgments of any kind including death, bodily injury or illness, or property damage that may occur during while my child drives his/her own vehicle.

Parent/guardian signature

Date

Print Parent/guardian Name

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Secret Sisters

"Secret Sisters" is a program that helps team bonding, and adds fun memories for the girls.

Here are instructions each girl should follow:

- Each girl interested in participating will receive one name from someone on the team and she will be her "secret sister" throughout the season.
- Each girl fills out the information sheet below that will be given to the person who has her name.
- Girls should bring a "gift" for their secret sister before each away game.
- Gifts should be small, inexpensive or free. Ideas are; snacks, candy, water bottles, sport drinks, homemade cards or signs, funny toys, etc. Check out the dollar store, Big Lots, etc. Please do not spend a lot, it gets out of hand. Try to keep it under \$5 per gift (free or less is good too). Have your daughter use her creativity; that makes it more fun anyway.
- Girls should find unique or different ways to get their "gifts" to their secret sisters. They should not tell anyone who they have; it eventually spreads and takes away the fun.
- At the banquet, girls will reveal who their secret sister is and should bring a \$20 gift card for their final gift (and sign their name).

If you do not want to participate, please do not have your daughter take a name.

Please have your daughter complete the following information and submit it at the Parent Meeting on, February 21, 2018 only if she will be participating:

Cut here

.....
Name: _____

Favorite Snack: _____

Favorite Candies: _____

Do you like sports drink or water? _____

Favorite Color: _____

Nickname(s): _____

Hobbies: _____

Gift Card Ideas: _____

Is there anything else to know about you? _____

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Program Philosophy

The Athletic Department at Capistrano Valley High School serves the mission of the institution by providing student-athletes the opportunity for scholarly development, competitive experiences, and developing physical, intellectual, social, and psychological wellness that embodies the total person.

This program is designed for individuals to learn and compete in the sport of Lacrosse. The goal is to develop individuals, and the team to compete at a championship level. It is a simple game of execution and teamwork which teaches student-athletes many important life experiences that will help build the future citizens and leaders of our society.

As the head coach of the Capistrano Valley High School Girls Lacrosse program, I believe that each student-athlete should exemplify the highest ideals of scholarship, sportsmanship, and citizenship. Players right or wrong are held to a higher standard than all other student-athletes. As head coach I welcome this high standard because I believe that it is warranted. This program will demand excellence in all aspects of the student-athletes' lives: Academics, citizenship, sportsmanship, and performance.

- All student-athletes will be required to have a minimum of a 2.0 grade point average with no D's or F's. Any student receiving a D or F will be suspended from games until her classroom achievement is brought up to a C. Although average performance is not our goal it will be tolerated during the season.
- All student-athletes will receive at least an S in citizenship. Any student receiving a U in citizenship will be suspended from games until her behavior is remedied. This will include a student-coach-teacher conference.
- Sportsmanship is simply good character when participating in sports. Sportsmanship is about respect for opponents, officials, teammates, coaches- and especially for the game itself. Profanity, vulgarity, off-color or derogatory statements will not be tolerated. Players engaging in such activity will be removed from the field and reprimanded in a manner as to prevent future inappropriate behaviors.

Behavior

1. Athletes are reminded that their conduct and behavior is a direct reflection upon Capistrano Valley High School Girls Lacrosse and will therefore conduct themselves in a manner consistent with proper discipline, professionalism and sportsmanship. Specifically, players will be respectful to all persons, and especially to: school employees, teachers, parents, teammates, coaches, opponents, game officials and other students.
2. Players will keep in mind the following guidelines in assessing their behavior:
 - Players will always act with honesty and integrity.
 - Players will not curse, swear or use any type of vulgarity.
 - Players will refrain from horseplay.
 - Players will maintain proper decorum while in the locker room, training room and/or on the bench.
 - Players will help maintain a clean field, locker room and campus.
3. Failure to adhere to these guidelines will result in disciplinary action up to and including the possibility of dismissal from the team. Discipline will be based upon the severity of the player's actions, and the overall past record of the individual player in question.