



2007 US Lacrosse U.S. Women's U-19 Team Regional Selector Application

Name: _____

Address: _____

Town/State/Zip: _____

Home Phone: _____ Work Phone: _____ E-mail Address: _____

US Lacrosse Membership #: _____ Chapter and Region you represent: _____

Are you affiliated with a club lacrosse team and what is your affiliation?

Please list coaching experience (include years coached):

Why do you want to be a selector?

List what you feel is your area of expertise?

Please list your favorite selection drill(s)

Please return to:

US Lacrosse

Attn: Ann Kitt Carpenetti, Women's Division Director

113 West University Parkway

Baltimore, MD 21210

(fax) 410.366.6735/ acarpnetti@uslacrosse.org

Application Deadline: June 15, 2006