



SUNDAY, OCTOBER 6th
MONOGRAM FOODS
SMITH RIVER SPORTS COMPLEX
MARTINSVILLE, VA

Team Name(s) _____

- High School Varsity
- High School JV
- 2029/2030
- 2031/2032
- 2033/2034

Club Director _____ Cell _____

Emails _____

Coach _____ Cell _____

Emails _____

REGISTRATION FEE - \$875 per team

All teams will play 3 games minimum with the top 2 teams in each age division advancing to a championship game. Full payment of \$875 per team is due by 9/20/24. There are no refunds after 9/20/24. Please email Kathy at: cardinalcup@gmail.com if you plan to make your registration payment by Venmo. If paying by check...

Please make check payable to: *ONS Lacrosse Foundation*

Mail check and registration form to:

ONS Lacrosse Foundation-Cardinal Cup
6500 Ivystone Drive
Jamestown, NC 27282