

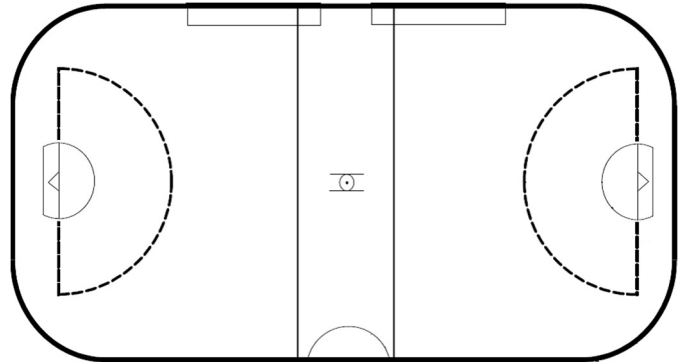


Box Lacrosse Practice Plan

Division:	Date:	Time:	Practice #
Objectives:			

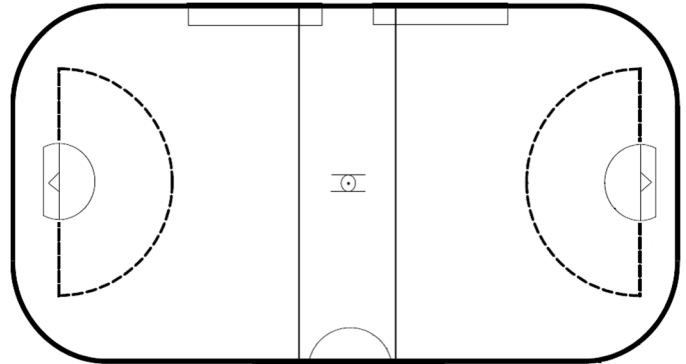
Time:	Drill Name:
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Description & key teaching points:



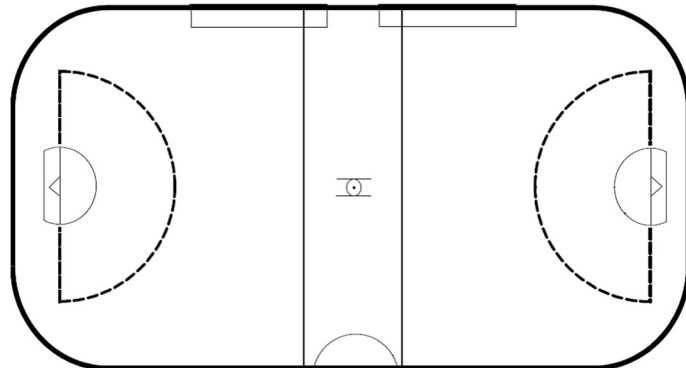
Time:	Drill Name:
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Description & key teaching points:



Time:	Drill Name:
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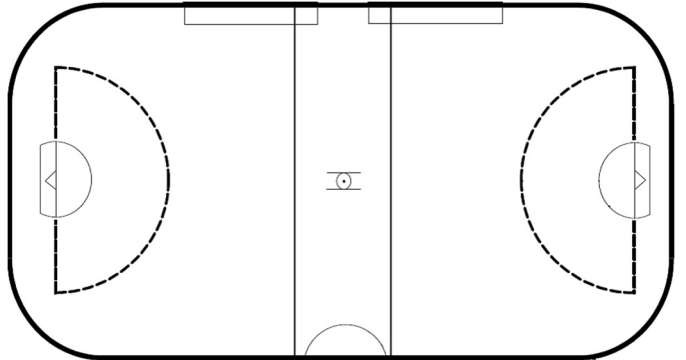
Description & key teaching points:





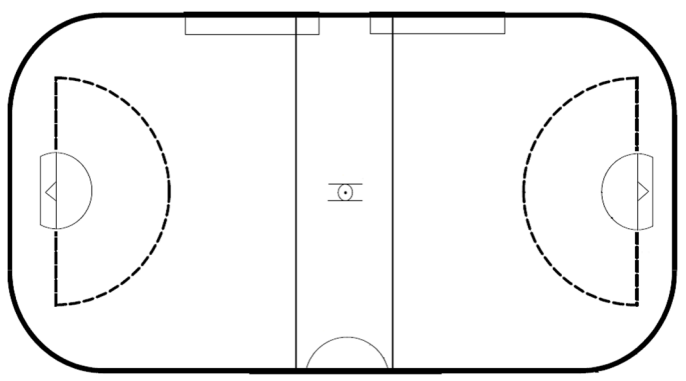
Time:	Drill Name:
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Description & key teaching points:



Time:	Drill Name:
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Description & key teaching points:



Time:	Drill Name:
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Description & key teaching points:

