Sue Cowperthwait is in her fourth season as a head coach at Monmouth University and in her fifth season as a member of the Hawks coaching staff.

In her first season at the helm, Cowperthwait guided Monmouth to its best season to date as the Hawks posted a 12-8 mark, won their first ever Northeast Conference title and made their first ever appearance in the NCAA Tournament. Two years ago, the Hawks came within one game of making a repeat appearance at the NCAA Tournament. Last season, Cowperthwait guided Monmouth to its second-ever Northeast Conference regular-season title.

Cowperthwait enjoyed a stellar collegiate playing career at Virginia Tech. A four-year starter on defense for the Hokies, she earned All-Atlantic 10 and Atlantic 10 Defensive Player of the Year honors as a senior in 1999. That year, Cowperthwait also led VT to an Atlantic 10 Conference championship and the Hokies finished the season ranked No. 20 in the nation.

A native of Media, Pa., Cowperthwait earned a bachelor’s degree in business management from Virginia Tech in 1999. Cowperthwait is currently pursuing her master’s degree in business administration at Monmouth.

A non-refundable deposit of $40.00 for the week must accompany your application to secure a place at camp. Applications are due by June 20, 2003.

From the Garden State Parkway - Exit 105. Take Route 36 to Route 71. Turn right onto Route 71, continuing as Route 71 forks into Cedar Avenue (stay left). Go through one traffic light and at the second, turn right onto Norwood Avenue. Make first right into parking lot adjacent to the Great Lawn grass practice fields.

Contact the MU Athletic Department at (732) 571-3415 or (732) 263-5556 for additional information.
MONMOUTH UNIVERSITY
VARSITY LACROSSE NIGHT CAMP
APPLICATION FORM

FOR OFFICE USE ONLY
Amount 
Date 
Reply 
Amt. Due 

Name: _____________________________________
Address: ____________________________________
City: _______________________________________
State: ____________ Zip: _____________________

Home Phone: _________________________________
Emergency Phone: ___________________________

Name of Your School: _______________________
Coach: _____________________________________

Age: _______ Pos: _______ Years Played: _______

Grade You’ll Enter This Fall: ______________________

I hereby authorize the directors and employees of Monmouth University’s Varsity Lacrosse Night Camp to act for me according to their best judgement in any emergency requiring medical attention. I hereby waive and release all camp employees from any and all liability from injuries and illness while at camp.

__________________________
Parent’s or Guardian’s Signature