

DuBois Soccer Association

Fall 2025 Recreational Registration



You can register online at www.duboissoccer.com

PLAYER INFORMATION

| | | | | |
|--------------------------|--------------------|--------------|--|--|
| Players 1 name (OLDEST): | Birth date: / / | Current Age: | Gender: <input type="checkbox"/> M <input type="checkbox"/> F | Seasons Played <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3+ |
| Players 2 name: | Birth date: / / | Current Age: | Gender: <input type="checkbox"/> M <input type="checkbox"/> F | Seasons Played <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3+ |
| Players 3 name (FREE): | Birth date: / / | Current Age: | Gender: <input type="checkbox"/> M <input type="checkbox"/> F | Seasons Played <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3+ |

ATTACH PHOTO COPIES OF EACH BIRTH CERTIFICATE - REQUIRED BY PA WEST

CONTACT INFORMATION

| | | | |
|-------------------------------|-------------------------------|--------------------------------------|--|
| Primary Contact: | | Secondary Contact: | |
| Primary Phone: () | Primary Email: | Secondary Phone: () | Secondary Email: |
| <input type="checkbox"/> Head | <input type="checkbox"/> Asst | <input type="checkbox"/> Team Parent | |
| | | <input type="checkbox"/> Head | <input type="checkbox"/> Asst Coach <input type="checkbox"/> Team Parent |
| Primary Address: | | City | State Zip |

REGISTRATION FEE

| | | | | |
|------------------------|------|--------------------------------------|-------------------------------|--|
| Early Registration | \$60 | Expires 6/29/2025 | <input type="checkbox"/> Cash | <input type="checkbox"/> Check # _____ |
| Regular Registration | \$70 | Expires 7/21/2025 | Date: | Total: |
| Wait-List Registration | \$85 | Begins 7/22/2025 (As space permits.) | | |
| Pee Wee (Age 4) | \$25 | No fall peewee | | |

MEDICAL RELEASE AND PARTICIPATION AGREEMENT

I, the undersigned, parent or legal guardian of the participant(s), a minor, hereby authorize the coaches, assistant coach, and or parents of team members acting in the capacity of activity supervisors/vehicle drivers, as my agents, to consent to medical, surgical, or dental examination and or treatment to the above said minor(s), by any physician or surgeon in the event of an accident, injury, sickness, etc., under the direction of any of the said person(s) on this registration when the need for such treatment is immediate and until such time as I can be contacted.

This release is effective for all activities (including travel) associated with the team including: 1) all soccer practice session and exhibition games. 2) all soccer league games. 3) all tournament games.

I also assume responsibility for payment of such treatment. I, the parent/guardian of the registrant, a minor agree that I and the registrant will abide by the rules of the USYSA, its affiliates, organizations, and sponsors. Recognizing the possibility of physical injury associated with soccer programs and activities (the "programs"). I hereby release, discharge, and/or otherwise indemnify the USYSA, its affiliates, organizations, and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the programs, against any claim by or on behalf of the registrants participation in the programs an/or being transported to or from the same, which transportation I hereby authorize.

We hereby agree that the soccer association for youth (say) its members, coaches or officers shall not be liable for any injury or loss which my child may sustain while participating in activities of any kind whether sponsored by or under the supervision of say and we agree to indemnify and to hold harmless say, its members, coaches, officers or designates of any kind from any claim whatsoever.

| | |
|---------------------------------------|-------------|
| Parent or Guardian Name (Print) _____ | Date: _____ |
| Parent or Guardian Signature _____ | |

Photo Opt Out: At times our club posts pictures of teams and soccer activities on our website and social media outlets. If you would like to opt out and not have your child's picture shown on our social media please sign here to opt out and we will get you on a list to for non-exposure for our the social media photos. **For Photo opt out Parent or guardian Sign:** _____

Fall 2025 Recreational Information – Keep for your records

AGE GROUPS

| | |
|-----------------|---|
| U12: | 1/1/13 - 12/31/14 |
| U10/12 | 1/1/15 - 6/30/15 |
| Overlap: | (This 6- month age range could potentially play U10 or U12 depending on player/team numbers.) |
| U10: | 1/1/16 - 6/30/17 |
| U8: | 7/1/17 - 6/30/19 |
| U6: | 7/1/19 - 6/30/21 |
| Pee Wee: | 7/1/21 - 6/30/22 (Pee Wee is only offered in the Spring.) |

In accordance to club guidelines, players will be assigned the appropriate age group during the registration process.

Payment is required for the two oldest siblings, the third and additional siblings (attach another copy) are **FREE**.

“Playing Up” an age group is rare and not recommended. Players must be in their last eligible age group season (spring), meet certain criteria, and request to “play up” in writing. They will be processed individually.

-Pee Wee Clinic is only offered in the spring season.

-For more information, refer to the “Age Table” on DuboisSoccer.Com

-Pee Wee Players must be 4 years old by June 30, 2025.

Parents Please Note:

All U6, U8, and U10 games are played on Saturdays. All games are at Spider lake or Sandy Park. U12 and U14 games are Sunday afternoons with some games at Spider Lake and some games at other local clubs in the area. (Brockway, Brookville, Clearfield, Reynoldsville, Curwensville, St Marys etc.)

Important Dates:

Walk-in: TBA

Early Reg: Ends 6/29/25

Regular Reg: Ends 7/21/25

Late Reg: Begins 7/22/25
(As space permits)

Wait-List: Players may be wait-listed anytime after regular registration ends as age groups fill up. during late registration

1st Practice: Week of 8/25/25

1st Game: Weekend of 9/6/25

VOLUNTEER INFORMATION

DuBois Soccer Association is a volunteer organization and appreciates every effort to assist our mission, especially hours donated by our parents and guardians. Recreation leagues are organized as a fun activity and prior soccer knowledge is **not** a requirement. Experienced coaches are available to answer all your questions.

In accordance with PA State Laws, coaches are required to apply and pass four on-line child safety clearances. The clearances are fully transferable to other organizations (such as PTAs, youth groups, scouting, etc).

SEASON INFORMATION

Volunteer head coaches determine the practice schedule and typically practice once or twice a week for at least an hour. Every team’s practice schedule is determined by the head coach primarily based on their availability.

Most age groups play Saturday mornings between 9 AM and 12 PM at Spider Lake. U10 plays on Sundays in the Fall season only. Depending on the level of player interest, older age groups (U12 and up) often partner with neighboring clubs and games will include limited travel.

Pee Wee Soccer (only available in the Spring) is a Weekly Clinic for 4 year olds. Pee Wees meet once a week on Saturdays at noon for a 1 hour introduction to soccer for 5 weeks (nothing during the week). This is for kids who have turned 4 but not yet 4 ½ years old to join U6.

FEE ASSISTANCE PROGRAM

The DuBois Rotary Club and the DuBois Soccer Association together provide money to needy families for soccer registration fees. If you feel you need financial assistance, please call to discuss your situation. This will work on a sliding scale; depending on family situation and income, you may pay a partial fee or none at all.

ADDITIONAL QUESTIONS

Please refer any questions to our website at www.duboissoccer.com or email info@duboissoccer.com