



U-8 ACADEMY

For PLAYERS AGES 6 and 7 YEARS OLD

Spirit United U-8 Academy Registration is now open.

The U-8 Academy runs for 8 weeks and is broken down into two four-week sessions. Each four-week session is \$60.00. The U8 Academy is aimed at children who desire to be a travel team player. The program is for children who wish to give themselves every possible chance at success in travel team try outs.

Session One – Individual Possession, Dribbling to Maintain Possession, 1 v 1 Attacking and 1 v 1 Defending

Session Two – Short Passing and Receiving, Passing and Moving, Possession and shooting

All sessions are designed for players to get maximum touches on the ball and to teach the techniques that are needed to be a good travel team player.

Practices are co-ed 3:30 - 5pm. Practices will be held at United Sports Training Center on the following dates:

Session One

Sunday - January 17th, Sunday - January 24th, Sunday – January 31st and February 7th

Session Two

Sunday - February 14th, Sunday - February 21st, Sunday – February 28th and March 7th

www.spiritunited.org



SUSC U-8 Academy Registration

Child Last Name: _____ First Name: _____ Middle Initial: _____

Prior Soccer Experience: Years of Play _____

Street: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Birth Date: ____/____/____ Sex: Male ___ Female ___ Grade: _____

Father's last name: _____ Fathers First Name: _____

Home Phone: _____ Work Phone: _____ email: _____

Mother's last Name: _____ Mothers First Name: _____

Home Phone: _____ Work Phone: _____ email: _____

Emergency Contact: _____ Phone: _____

Please list any medical conditions we should be aware of: _____

Family Medical Insurance Co: _____ Policy Number: _____

RELEASE STATEMENT: I, the parent or guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of SUSC and USSF, its affiliated organization and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for SUSC and USSF affiliate accepting the registrant for its soccer programs and activities, I hereby release, discharge and/or otherwise indemnify SUSC, its officers, coaches, managers, referees, and affiliated organizations, including the owners of the fields and facilities utilized for the soccer program. I affirm the registrant is in sound health, physical condition, and that the child is covered by health insurance secured independently.

GOOD SPORTSMANSHIP PLEDGE: Our family pledges to exhibit good sportsmanship at all times, to our teammates, opponents, coaches, referees, and the families and fans of soccer. I recognize that youth soccer and playing at Spirit United is, first and foremost, for and about our children and their development in soccer and, more importantly, as people. We share in Spirit United's "commitment to excellence and sportsmanship".

Parent or Guardian Signature: _____ Date: ____/____/____

Registration Fee: each four week session is \$60.00.

Deadline dates: Session One is January 7th
Session Two is February 7th

Registration is not complete until payment is received. Payment should be submitted on or before the deadline date with a completed registration form. Checks should be made payable to "SUSC" and mailed to:

**Spirit United Soccer Club
P O Box 156
Downingtown, PA 19335**