

THE VERNON C. NEAL SPORTSPLEX

200 Dunn Ave. - Washington, PA 15301

Phone No.: 724-222-2522 – FAX 724-222-2550

www.brownsonhouse1.org – vcnsportsplex@gmail.com

WINTER INDOOR SOCCER

BEGINNING IN JANUARY 2018

Call 724-222-2522 for more information.

YOU CAN NOW REGISTER ONLINE AT

www.brownsonhouse1.org



AGE DIVISIONS

AGE*	PLAY DATE**	PLAYERS ON FIELD	BIRTH YEAR #	AGE*	PLAY DATE**	PLAYERS ON FIELD	BIRTH YEAR#
U8 Coed	FRI/SAT/SUN	7+1	(2010)	U14 Girls	SAT/SUN	5+1	(2004)
U10 Girls	FRI/SAT/SUN	7+1	(2008)	U14 Boys	SAT/SUN	5+1	(2004)
U10 Boys	FRI/SAT/SUN	7+1	(2008)	High School Girls	TU/WED/TH/SUN	5+1	(2000)
U12 Girls	SAT/SUN	6+1	(2006)	High School Boys	TU/WED/TH/SUN	5+1	(2000)
U12 Boys	FRI/SAT/SUN	6+1	(2006)				

* The Vernon C. Neal Sportsplex reserves the right to combine age groups.

** Teams will primarily play their games on the day listed, but MAY have games on other days.

Players must be born in the year listed in that age group or later.

PLAY FOR THE 10 GAME SEASON BEGINS ON JAN. 2nd

Team Fee for teams registering by Dec. 18, 2017

For teams that played in our fall 2017 session

\$980.00 plus ref fees which are paid to the ref prior to the start of the game.

For all other teams:

\$1,095.00 plus ref fees which are paid to the ref prior to the start of the game.

Team Fee for teams registering after Dec. 18, 2017

\$1,300.00 plus ref fees, which are paid to the ref prior to the start of the game.

Referee Fees: \$8 per game per team for U12 & under

\$20 per game per team for U14 Girls & Boys

\$20 per game per team for HS Girls & HS Boys

A \$200.00 deposit is required when registering a team.

REGISTRATION FORM ON BACK

REGISTRATION FORM

THREE WAYS TO REGISTER

1. Online registration is now available at www.brownsonhouse1.org.
2. Fill out the form below and fill it out and mail the form to the address below. Please include the registration fee of \$200.00.
3. You can call us at 724-222-2522 and register over the phone.

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WINTER 2018 SOCCER SESSION

REGISTRATION FORM

Team Name _____ Boy ___ Girl ___ Age Group _____

Coach _____ Manager _____

Address _____ Address _____

City/State/Zip _____ City/State/Zip _____

Main Phone _____ Main Phone _____

Secondary Phone _____ Secondary Phone _____

E-Mail _____ E-Mail _____

MAKE CHECKS PAYABLE TO THE VERNON C. NEAL SPORTSPLEX

Per the new state law, coaches will all have to sign a waiver stating that they have all three state mandated clearances.