DTS Junior Academy I *(Ages 5-6)*
DTS Junior Academy II *(Ages 7-8)*

DTS Juniors 1	DTS Juniors 2
Bridgewater-Raritan residents… Is your child interested in club soccer but not sure how and where to start? Soccer Centers will teach your child the necessary skills that will help them during the try-out process. Players will develop the skills needed in a competitive game and will; therefore, take a step ahead of the competition. This class will focus on the fundamentals of the game; they will learn the right technique to pass, dribble, shoot and much more. **AGES 5-6**	This class is for the committed Recreation and/or Travel player who is looking for extra training. The emphasis of the class is on moves, passing and shooting. The players can show their learning experience during the small-sided games, which they will be playing in the class. **AGES 7-8**

All classes are held at **Soccer Centers** (300 Memorial Drive) in Somerset, NJ just a half mile off exit 12 off of Route 287. For more information about Soccer Centers visit www.SoccerCenters.com.
Cost - $175 Per Player (8 Week Session) / Cost - $120 Per Player (5 Week FRIDAY Session)
Make checks payable to "Soccer Centers". Space is limited; registration is based on first come first serve at the Bridgewater Recreation Department. When signing up for more than one session or child, separate checks and registration forms are required.

Session #2 – Winter I Classes: ** Dates & Times are for both Junior Academy I & II Classes **

$175: Saturday - 8:50am-9:40am – December 5th, 12th, 19th, 26th, January 2nd, 9th, 16th, 23rd
$175: Monday - 5:00pm-5:50pm – December 7th, 14th, 21st, 28th, January 4th, 11th, 18th, 25th
$120: Friday - 5:00pm-5:50pm – December 11th, 18th, January 8th, 15th, 22nd

Three ways to register!

1) In person at the Bridgewater Recreation Department (Municipal Building – 100 Commons Way - Bridgewater) 9am to 5pm Monday to Thursday 8am to 5pm Fridays,
2) Drop registration off in the "REC" mail slot located on Municipal grounds before or after office hours
3) Via postal service.

=== ✂========== ✂========== ✂========== ✂========== ✂ ===

2015-16 - DTS Juniors 1 & 2 — Checks payable to "Soccer Centers"

Last Name (Participants)	First Name	Gender	
Mailing Address	Town	State	Zip
Home #	Cell # Parent	Work # Parent	
Email Address	Age & Date of Birth	Session # & Day & Time	

If the participant has individualized needs due to a disability, please check the following and someone will contact you regarding reasonable accommodations. ☐ **Yes, I will need to be notified regarding special considerations for my child.**

This is a contact sport. Injuries may occur. Please note that Bridgewater Township Recreation Department does not provide individual medical coverage for its participants. Each participant will be covered under his/her family's medical policy. It is recommended that families have insurance before the child participates. The Recreation Department reserves the right to cancel, alter, supplement, limit registration or change any other information.

_____ _____/_____/ _____
Parent/Guardian Signature — Date

Bridgewater Recreation Department 100 Commons Way – Bridgewater, NJ 08807 (908) 725-6373
office hours 9am to 5pm Monday to Thursday 8am to 5pm Fridays www.bridgewaternj.gov