

AYSO Section 2 CA, OR, NV, AK, WA www.aysosection2.org

## SOCCER PARENT HOW-TOS:

## Account creation (UPDATED – 2021) Register your child for soccer (UPDATED - 2021)

This Soccer Parent How-To document was created to help new soccer parents create an account and register their player(s) on our new Mobile First online registration platform powered by Sports Connect.

For returning players/parents, this document will show you how to register players in the new system. You can now complete the entire process on a mobile device!

Feel free to modify highlighted text to include links and contact info for your specific region. Screen shots taken using chrome on windows desktop. Mobile device views may be oprganized differently. As always, if you have any problems, don't hesitate to reach out to us at <u>webmaster@aysosection2.org</u>

1. New to our region? No problem! Navigate to our <u>homepage</u> and click on "LOGIN" to create an account as shown below. If you've played with us before, you already have an account. Log in to your account and then skip to step 8 to get started!



2. One the next screen, select "Register Now" to create a new account.



3. Enter your email address, create a user name and a password and then click "Create Account".



4. Since you are registering your child as a player, select "Register my Players".



5. Before you can add your players, the system needs some information about you, the parent. Fill in your information. Marge Simpson was used as a reference below.

ON 328			¥ 👔
<b>Okay, let's</b> Before we begin a	get to know you first. dding your kids to your account, we need to colle	ect a few pieces of information from you, the account hold	ler.
Account Holder Ir	nformation		
	First Name*	Last Name *	
	Marge	Simpson	
	Username	Relationship to Player*	
	margeincharge	Mother	-
Change			
Contact Informat	ion		
Email Address *		Cell Phone*	
		939-555-0113	
Telephone *			
939-555-0113			
Do you want to recei	ive text alerts from your organization? What's this?	🕐 Yes 🖲 No	

If you'd like to add another parent to your account, enter their information and click "Continue".

Address Information						
Street*				City*		
742 Evergreen Terrace			Unit	Springfield		
State*	ZIP*					
Oregon	* 58008					
Additional Information						
* dol			Employer *			
Enter Answer			Enter Answer			
Stay at home mom			Self			
₽		16/30			4/30	
Additional Account Holder In Fisitiane*	formation	16/30	Last Name * Simpson		4/30	
Additional Account Holder In First Name* Homer Relationship to Player Father	formation	16/30	Last Name* Simpson		4/30	
Additional Account Holder In First Hame* Homer Relationship to Player Father Contact Information Additional Contact Empil *	formation	16/30	Last Name * Simpson		4/30	

6. Select how many kids you'd like to register, enter their names and then click "Continue". Don't worry, you can always add additional kids later.

REGION 328	¥ 👔
Nice to meet you Marge, how many kids are you registering today? Feel free to include all your kids here. Many sports organizations have programs for all ages.	+
Great, 1 player! What is their legal first name?	Continue

7. Enter your first player's information. If this is the first time this player has registered you will need to upload a copy of their birth certificate or passport for age verification purposes. For more information on this process email us at info@yourregion.org. Click "Continue".

<b>GOT IT, NOV</b> It's important th	V let's get Lisa's lat you enter the legal first r	INTO name & last name, as well a	is correct birthday so we can make sure to get Lisa registere	ed in the right program.
Player Informat	ion			
	Legal First Name *		Legal Last Name *	
HYLL A	Lisa		Simpson	
S-P-	Gender*		Date of Birth *	
Change	гепае			
	<ul> <li>Birth Certificate</li> <li>First time players to our leau</li> <li>Only.png, jpg, .odf, jpeg, .gif</li> <li>Maxfile size 10MB</li> </ul>	ge must provide proof of age. files allowed.		
Address Inform	ation			
Same as primary a	ccount Yes 🔽			
Street*			City*	
742 Evergreen Te	rrace		Springfield	
State*	ZIF	*		
Oregon	<del>▼</del> 58	8008		
oregon				

8. Select the available program you'd like to register your player for. In this example, Lisa only has one program to choose, 2021 Fall Soccer. Then click "Continue".

	Available programs fo	r Lisa	^
1	2021 Fall Soccer		Hide Divisions
	10U - Girls Season Dates: 08/01/2021 - 07/31/2022 Resistation Close Date: 09/21/2021		
	\$120		

9. View and accept the following waivers/agreements and answer any program specific questions.

	Gender*		Date of Birth *	
	Female		5/9/2013	Ē
Change	Only ong, jog, odf, joeg, giffiles allowed.			
	Max file size 10MB			
2021 Fall Soccer				
Concussion Information Sheet v31	818 *	COVID-19 Ass	umption of Risk, Waiver and Release o	f Liability Agreement v32362 *
View / Accept		Vie	ew/Accept	
Disclaimer Assumption of Risk and	Waiver v31619	Emergency Tre	atment Authorization v31618 *	
View / Accept		Vie	ew/Accept	
Prescription Opioids: What You Ne	eed to Know v32181 *	Sudden Cardia	c Arrest Information for Athletes and F	Parents/Guardians v31843 *
View / Accept		Vie	ew/Accept	
Physical Conditions of which staff	should be aware *	Is the participa	nt new or returning? *	
Enter Answer		⊙ New ⊙ R	leturning	
	0/40			
Jersey Size: *		What school do	pes the player attend? *	
		Select One		-

10. Review each waiver/agreement, check the box and then type your name to sign.

C PS	Female	- 5/9/2013	
Change	COVID-19 Assumpt Liability Agreement	ion of Risk, Waiver and Release of v32362	×
2021 Fall Socco cussion Information S	2. Acknowledge that your use of and/or p you contracting COVID-19, respiratory f members and others who may also suffer 3. Knowingly and voluntarily waive, relea harmless AYSO, AYSO United and this A)	participation in the programming of AYSO and this AYSO Region could result in ailure, death, and/or the transmission of COVID-19 to family or household t these effects; ase, covenant not to sue, and forever discharge, and agree to indemnify and hold rSO Region, its players, parents, volunteers, subsidiaries and other affiliates.	Agreement v32362 *
laimer Assumption of View / Acce cription Opioids: Wh	and its and their respective officers, direc and assigns (the AYSO Parties) from any without limitation, negligence), or any ot your use of and/or participation in the pr	ctors, members, employees, contractors, agents, representatives, successors and all liability, damages, losses, suits, demands, causes of action (including, her claims of any nature whatsoever, arising out of, or relating in any way to, ogramming of AYSO and this AYSO Region and any potential or actual exposure	iardians v31843 *
View / Acce	<ol> <li>COVID-19, to the maximum extent pe</li> <li>Agree to abide by the directives and gu COVID-19.</li> </ol>	rmitted by Jaw; and jidelines in effect in your state, county and community to disrupt the spread of	
rAnswer	web sites in your area, and by going to the You will also find AYSO-specific guidance to-play.	and resources on COVID-19 by accessing the City, county or other municipal e Centers for Disease Control and Prevention at https://www.cdc.gov. e and protocols on return to play at https://www.aysovolunteers.org/returning-	
ey Size: * .tOne	DATED: Signature Print Name If signing as parent/guardian on behalf of	f a player, please print player's name	
ur player a character in a	<ul> <li>I accept the Electronic Legal Agreem</li> <li>First Name*</li> <li>Marge</li> </ul>	ent Last Name* Simoson	
res 🕐 No		ampoort	
Back	Accept		Continue

11. Once all waivers/agreements are signed and all program specific questions are answered select "Continue".

oncussion Information Sheet v31818 *	COVID-19 Assumption of Risk, Waiver and Release of Liability Agreement v32362 *
✓ Accepted	✓ Accepted
sclaimer Assumption of Risk and Waiver v31619 *	Emergency Treatment Authorization v31618 *
✓ Accepted	✓ Accepted
escription Opioids: What You Need to Know v32181 *	Sudden Cardiac Arrest Information for Athletes and Parents/Guardians v31843 *
✓ Accepted	✓ Accepted
nysical Conditions of which staff should be aware *	Is the participant new or returning? *
ler Answer A	● New ○ Returning
	3/40
rsey Size: *	What school does the player attend? *
uth - Small	<ul> <li>Springfield Elementary</li> </ul>

12. Next you'll be asked if you'd like to volunteer! If you have any questions about volunteering to coach or referee please reach out and let us know, we'd be happy to help! info@yourregion.org Select the volunteer role and click "Continue".

2021 Fall Soccer 10U - Girls (Lisa is reg	gistered here)		
Head Coach	Team Manager	Assistant Coach	Referee
Marge Simpson is Selected	Team Manager	Assistant Coach	
	)		
✓ Selected	Select	Select	Select

13. Next you'll be asked to confirm information about you, the parent volunteer.

🔈 Marge			
<b>.</b>			
ou've selected the	following opportunity:		
2021 Fall Soc	cer		
Head Coach			
	────────────────		
	<u>לא</u>		
Contact Informatio			
Contact Informatio	n Legal First Name*	Legal Last Name *	
Contact Informatio	n Legal First Name* Marge	 Legal Last Name* Simpson	
Contact Informatio	n Legal First Name* Marge	 Legal Last Name * Simpson 	
Contact Informatio	n Legal First Name* Marge Email Address* wgollykid@gmail.com	 Legil Last Name* Simpson Date of Birth* 3/19/1980	
Contact Informatio	n Legal First Name* Marge Email Address* wgollykid@gmail.com Gender*	 Legil Last Name * Simpson Date of Birth * 3/19/1980 Street *	e
Contact Informatio	n Legal First Name* Marge Email Address* wgollykid@gmail.com Gender* Female	 Legil Last Name* Simpson Date of Bith* 3/19/1980 Street* 742 Evergreen Terrace	6
Contact Informatio	n Legal First Name* Marge Erral Address* wgollykid@gmail.com Gender* Female	 Legil Last Name* Simpson Date of lifets* 3/19/1990 Street* 742 Evergreen Terrace	6

14. All volunteers with us undergo a background check. Your SSN is required for this process. The yellow circles are certification uploads. We will offer training for these items so if you don't have them, don't worry! Next you'll need to view and accept the green circled agreements and waivers just like when we registered Lisa.



15. Read each waiver / agreement, click the box to agree top electronic signature, type your name and click "I Accept". Once all agreements are complete click "Continue".

orr			
	other time commitments, and it tells my child that he/sh	e is my top priority. 2. I understand that the top three reasons	*
	kids play sports are to have fun, make new friends and le	earn new skills. I understand that the game is for the kids, and I	
	will encourage my child to have fun and keep sport in its	proper perspective. I understand that athletes do their best	
	when they are emotionally healthy, so I will be positive a	and supportive. 3. I will redefine what it is to be a Winner in my	- 14
	conversations with my child. Winners are people who m	take the maximum effort, continue to learn and improve, and do	- 11
tio	not let mistakes, or fear of making mistakes, discourage	them. I understand that mistakes are an inevitable part of any	- 11
	game and that people learn from their mistakes. I under	stand that all children are born with different abilities and that	- 11
r	hest self 4 Lwill Honor the Come Lunderstand the imp	es to others, but now nersne is doing in comparison to his/her	- 11
	I will show respect for all involved in the same including	reaches players apponents apposing fans and referees 1	
	understand that officials coaches and players make mis	stakes If the referee makes a call I do not agree with I will	- 11
5	refrain from questioning insulting or making personal a	ttacks against him or her. 5. Lunderstand that games can be	- 11
es:	exciting for my child as he/she deals with the fast-paced	action of the game, responds to opponents, referees.	- 11
	teammates, and listens to coaches. I will not yell out inst	tructions. During the game, I will make only sportsmanlike	- 11
	comments that encourage my child and other players or	n both teams. 6. I will not make negative comments about the	- 11
es	game, coaches, referees or teammates in my child"s pre	sence. This sets a bad example, which can negatively influence	- 11
	my child"s motivation and overall experience. I agree to	act in a sportsmanlike manner and make every effort to foster a	- 11
	friendly and nonviolent atmosphere. I agree to honor th	e AYSO Parent Pledge in my words and actions.	- 11
Rit			
ot 🤇	I alcept the Electronic Legal Agreement		- 11
	First Name*	Last Name *	- 11
	Marge	Simpson	
			*

16. Now you're ready to start the checkout process! Review your order and the click "Continue". Remember, the AYSO Membership fee is the once per Membership Year (MY) fee that goes to AYSO National. This fee allows your player to be covered by AYSO Soccer Accident Insurance.

Here is your order summary. Let's review your order and payment options befor out and will have to log back in to complete your o	ore checking out. For your security, if you are inactive order.	e on this page for 20 m	inutes you'll automatic	ally be logged
Lisa				
2021 Fall Soccer - 10U - Girls	Hide Breakdown 🔿		Pay in Full	
	Division Price	\$120.00		
	AYSO Membership Fee	+\$20.00		
	Virtual player discount	-\$120.00		
	Subtotal	\$20.00		
Total Due:		\$20.00		
Total Due Today:		\$20.00		
< Back			C	Continue

17. If you have a coupon code, enter it here. Consider making a donation during check-out. Donations help us reduce the cost of registration and allow us to offer scholarships to families that otherwise would not be able to participate.

COUPON CODE		Order Summary	Order Summary	
	N	Registration		
If you have a coupon code, enter it here:	Coupon Code Apply	Programs	\$20.0	
		Service Fee	\$2.7	
		Subtotal:	\$22.7	
DONATIONS		Total:	\$22.7	
Want to help support soccer in Rio Vista? Don't h a registered 501c3 non-profit organization. Your	ave the time to be a volunteer? Consider making a donation! ANC donation is fully tax deductible and helps sRead More	Due Today:	\$22.7	
🔿 Midfielder	\$10.00			
O Striker	\$20.00			
⊖ Keeper	\$50.00			

18. New this season is SecureFee Registration Cancelation Insurance. This is offered through the Sports Connect platform. Please note that COVID-19 related cancellations are NOT covered. Select yes or no and scroll down to continue.

INSURANCE	Order Summary	
	Registration	
udd SecureFee <sup>**</sup> Registration Cancellation Insurance and you may be reimbursed for the cost of your non- efundable, unused registration fees, less any refunds, up to \$5,5000, if you cannot participate in the event for which ou registered for any of the covered reasons stated in the policy.	Programs Service Fee	\$20.0 \$2.1
Covered reasons include, but are not limited to:	Subtotal:	\$22.
Registrant involved in a Traffic Accident on their way to the event     Death of a Family Member	Total: Due Today:	\$22.7 \$22.7
lease Note SecureFee <sup>TT</sup> plans are different based on the length of your event; <ul> <li>If your event is 44 days or less, coverage is provided from the date you pay your registration fee and continues until the first scheduled day of the event for which you have registered.</li> </ul>		
<ul> <li>If your event is 45 days or more, season coverage is provided. This coverage requires that you be unable to participate in the event for which you are registered for 30 consecutive days or more to initiate a claim.</li> </ul>		
:OVID-19 related cancellations are not covered by SecureFee <sup>™</sup> . Click on <u>COVID Statement</u> or on <u>SecureFee Policy</u> <u>erms</u> to learn more about covered reasons, exclusions, and limitations.		
Eligible Programs		
Lisa Simpson		
2021 Fall Socrer		
Yes, please add SecureFee <sup>™</sup> for \$5.00 to cover my \$20.00 registration fee.		
Yes, please add SecureFee <sup>™</sup> for \$5.00 to cover my \$20.00 registration fee No thank you, I do not wish to purchase SecureFee <sup>™</sup> .		

19. Enter your payment information, confirm your card billing address, accept the terms and conditions and click "Submit Order".

PAYMENT METHOD		Order Summary	
Payment Method '		Registration	
		Programs	\$20.0
	Cards Accepted:	Service Fee	\$2.7
Credit Card *	VISA Made Cor	Subtotal:	\$22.7
		Total:	\$22.7
Month* • Year*	Security Code * What's this?	Due Today:	\$22.7
is the primary account noi	uer a duureaac 💟 rea		
Marge	Simpson		
742 Evergreen Terrace	Unit		
Dby	Stata		
Springfield	Oregon	*	
ZIP Code 58008			
		LArge to the Terms and	Conditions
4 Back		c	ubmit Orda

You're all set! Your player is now registered to play soccer!

If you signed up to volunteer, you will receive an email to complete the background check initiation process. Once you're verified you will be eligible to be added to a team's roster and sign up for Training!

If you have any questions, problems or issues please contact us at: <u>rc@yourregion.org</u> or info@yourregion.org