

# MYS Registration

## MYS 2009 Winter BallMasters Registration Instructions

**(If you are new to MYS, please see instructions below)**

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### **2009 Winter BallMasters Registration for Existing MYS Member**

Registering your household and players for MYS Winter BallMasters is a three step process.

#### **Step 1. Household Information**

Verify your household registration information for each parent/guardian and update any information necessary. You must enter an "Emergency Contact" for the Winter Program; it is most helpful if this is someone in addition to one of the parents or guardians. To move to the Player Registration page, click on "Save & Go to Players."

#### **Step 2. Player Registration**

All players who have registered for previous MYS seasons will appear in the grid at the top of the page. To select a specific player, choose that player from the "Select Player" drop down menu. To add a new player, select "Add New Player". Once you have selected a player, a list of available Winter BallMasters sessions will appear based on the player's birth date. You can select one or more of the sessions by clicking the checkbox to the left of any session. Please be sure to enter the required "Medical Information" and review and agree to the Winter BallMaster waivers & policies at the bottom of the page. If you do not enter information into any of the required fields (\*) you will receive an error message at the top of the page. After finishing your selections for any given player, you can press "Save" and then follow the process above for the next player. To move to the Checkout page, click "Go to Checkout".

**Step 3. Checkout**

This page allows you to pay via credit card, or download and print the invoice so that you can mail it to MYS accompanied by a check. To view the registration summary of your Winter BallMasters 2009 sessions and associated fees click on "View Invoice / Statement". You may print or download the invoice as a PDF. Click on "Submit Credit Card Payment" to remit payment via credit card. To pay via check, click on "Pay by Check" to download and print your invoice. Please make your checks payable to MYS.

Mailing Address: MYS  
PO Box 724  
McLean, VA 22101

**2009 Winter Ball Masters Registration for Families New to MYS**

Registering for MYS 2009 Winter BallMasters is a very straight forward process. Follow the steps below to complete your initial registration information. After the initial login process, you will follow the same three steps as outlined above.

**Step 1. Login Page**

If you have never registered with MYS before for any program or season, please click on "Never Registered Before" and enter the email address for the Primary and Secondary Parent or Guardian. If there is no Secondary Parent, please check the appropriate box. Click on "Save" to record this information.

**Step 2. Household Information**

Information you entered on the initial pages should now be present. You must now enter the remaining required information for both parents/guardians. If you have selected "No Secondary Parent", you will only need to enter information for the Primary Parent. If you do not enter information into all of the required fields (\*), you will receive an error message at the top of the page. You also must enter an "Emergency Contact" for the Winter Program; it is most helpful if this is someone in addition to one of the parents or guardians. To move to the Player Registration page, click on "Save & Go to Players."

**Step 3. Player Registration**

To get started, select "Add New Player" and fill out required information. Once you have entered the player, a list of available Summer Camp sessions will appear based on the player's birth date. You can select one or more of the BallMaster sessions by clicking the checkbox to the left of any session. Please be sure to enter the required "Medical Information" and review and agree to the MYS Winter BallMasters waivers & policies at the bottom of the page. At this time, you can go to Checkout or add additional players. If you do not enter information into any of the required fields (\*) you will receive an error message at the top of the page. After finishing your selections for any given player, you can press "Save" and then follow the process above for the next player. To move to the Checkout page, click "Go to Checkout".

**Step 4. Checkout**

This page allows you to pay via credit card, or download and print the invoice so that you can mail it to MYS accompanied by a check. To view the registration summary of your MYS 2009 Winter BallMasters sessions and associated fees click on "View Invoice / Statement". You may print or download the invoice as a PDF. Click on "Submit Credit Card Payment" to remit payment via credit card. To pay via check, click on "Pay by Check" to download and print your invoice. Please make your checks payable to MYS.

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PO Box 724  
McLean, VA 22101

# Player Registration

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## View Player Information

If you have registered your player(s) with MYS in the past, your child's record will be in our database. The information will be displayed in the grid at the top of the page:

**McLEAM** [View Registration Instructions.](#)  
If you have any difficulties please email [SoccerMcl@AOL.com](mailto:SoccerMcl@AOL.com).  
In an emergency call 703-506-8068. [Logout](#)

<< Go To Household   Save Player Information   Save & Go To Checkout >>

Fields marked with an asterisk \* are required.   [Help on this Page](#)

**List of Players**

First Name	Last Name	Status	Date of Birth
Fred Jr	Riemer	Not Registered	01/01/1994
Jenny	Riemer	Not Registered	01/01/2001
Justin	Riemer	Not Registered	07/02/1990

Select Player :   Fred Jr   Add New Player

First Name\*   Fred Jr

Last Name\*   Riemer

Gender\*   Male

Date of Birth (MM/DD/YYYY)\*   1/1/1994

T-Shirt Size\*   YS

T-Shirts are not part of the MYS Winter Ball-Masters Program.

## Add New Player

If you are new to MYS or would like to add new Players please select the "Add New Player" buttons as shown below.

**McLEAM** [View Registration Instructions.](#)  
If you have any difficulties please email [SoccerMcl@AOL.com](mailto:SoccerMcl@AOL.com).  
In an emergency call 703-506-8068. [Logout](#)

<< Go To Household   Save Player Information   Save & Go To Checkout >>

Fields marked with an asterisk \* are required.   [Help on this Page](#)

**List of Players**

First Name	Last Name	Status	Date of Birth
Fred Jr	Riemer	Not Registered	01/01/1994
Jenny	Riemer	Not Registered	01/01/2001
Justin	Riemer	Not Registered	07/02/1990

Select Player :   Fred Jr   Add New Player

Once pressed, the following screen will appear. Enter the appropriate information and press save to add the new player.

**MYS Add New Player -- Webpage Dialog**  
<https://register.mysoccer.org/webmysummercamp/NewPlayer.aspx>

**McLEAN**  
**View Registration Instructions.**  
 If you have any difficulties please email [SoccerMcL@AOL.com](mailto:SoccerMcL@AOL.com).  
 In an emergency call 703-506-8068.

**Enter New Player**

First Name \*

Last Name \*

Gender \*

Date of Birth (MM/DD/YYYY) \*

T-Shirt Size \*

**Clear Selections**

If at any time, you have saved training information on a player but have not yet checked out and paid for that user, you can use the “Clear Selections” button to remove the current selections. This will change the player from “pending” to “not registered”.

**Select Training**

Based on your player’s birthday, the available training sessions will appear in the table below. Please select as many sessions as you would like. Please pay close attention so that you do not pick sessions that have conflicting times. Players, who are close in age to the age group above, may be evaluated during the first days of camp and moved up to the more skill appropriate level based on the discretion of the MYS Winter BallMasters Staff.

**Select Player :**

First Name \*

Last Name \*

Gender \*

Date of Birth (MM/DD/YYYY) \*

T-Shirt Size \*

**Select Training : \***

	Program	Date	Time	Fee	Location	Age
<input type="checkbox"/>	U14 - U15 MPS Travel Winter BallMasters - Sundays	Jan 04, 2009 - Feb 22, 2009	2:30PM - 3:45PM	\$100.00	Spring Hill # 2	14-15
<input checked="" type="checkbox"/>	U14 - U15 MYS Travel Winter BallMasters - Sundays	Jan 04, 2009 - Feb 22, 2009	2:30PM - 3:45PM	\$100.00	Spring Hill # 2	14-15
<input type="checkbox"/>	U14 - U15 Recreation Winter BallMasters - Sundays	Jan 04, 2009 - Feb 22, 2009	2:30PM - 3:45PM	\$100.00	Spring Hill # 2	14-15
<input type="checkbox"/>	U14-U15 MYS Travel Winter Goalkeeping Academy - Sundays	Jan 04, 2009 - Feb 22, 2009	2:30PM - 3:45PM	\$100.00	Spring Hill #2	14-15
<input type="checkbox"/>	U14-U15 MPS Travel Winter Goalkeeping Academy - Sundays	Jan 04, 2009 - Feb 22, 2009	2:30PM - 3:45PM	\$100.00	Spring Hill #2	14-15
<input type="checkbox"/>	U14-U15 Recreation Winter Goalkeeping Academy - Sundays	Jan 04, 2009 - Feb 22, 2009	2:30PM - 3:45PM	\$100.00	Spring Hill #2	14-15

**Medical Information :**

## Medical Information

You will need to fill out all the required information as shown below. If your child has no known medical allergies, medical conditions, required medications or special needs, please check the box as shown.

Medical Information :	
<input checked="" type="checkbox"/>	Click here if your child has no known allergies, medical conditions, required medications or special needs.
Allergies*	<input type="text"/>
Medical conditions*	<input type="text"/>
Medications*	<input type="text"/>
	<input type="checkbox"/> My child may require the use of an inhaler and/or EpiPen in case of emergency.
Special Needs	<input type="text"/>
Primary physician*	<input type="text" value="Dr. Bob Jones"/>
Contact Phone Number*	<input type="text" value="703-555-121"/>
Insurance Carrier*	<input type="text" value="Blue Cross Blue Knight"/>
Policy Number*	<input type="text" value="122-12-444-77-8"/>

## Waivers & Policies

You must read and accept the MYS Winter BallMasters Waivers and Policies.

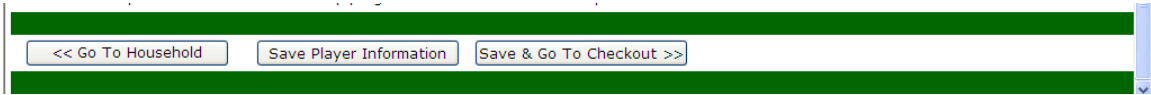
Waivers & Policies :
<b>By checking the boxes below, I agree to the MYS Camp Waivers and Policies.</b>
<input type="checkbox"/> <b>Authorization for Medication*</b>
I hereby authorize the MYS representative to administer the medication I have entered into the MYS Registration System for each child registered for the MYS Camp. I also represent that I have provided the required information for each of the medications that must be administered. I understand that medications will not be administered without written instructions and acceptance of this policy document.
<input checked="" type="checkbox"/> <b>Liability Release and Consent for Medical Treatment*</b>
Soccer is at times a physical, contact sport. As the parent or guardian of the player enrolled in McLean Youth Soccer's program, I understand that the activities, games, and training elements are hazardous by nature and I assume all risks of injury arising from participation. I release, indemnify and hold harmless McLean Youth Soccer and its directors, employees and staff from any claim, suit, demand or action arising in connection with the player's participation.
Personal medical insurance is required. If the player requires medical attention every effort will be made to contact the player's parent, guardian or emergency contact. In the event of an emergency, the player may be provided emergency medical services prior to informing the parent or guardian. I assume responsibility for any costs incurred in treating the player. I waive any liability or accountability to McLean Youth Soccer for medical services provided.
The player's parent or guardian is responsible for any property damage caused by the player. If a player's property is lost or stolen, McLean Youth Soccer will make every effort to locate the property. However, it accepts no responsibility for the loss or damage to a player's property. It strongly discourages players from bringing cameras, MP3 players, or other high valued items to camp.
I give permission to McLean Youth Soccer to use the player's picture or likeness in promotion of its camps in printed or electronic media. I renounce any claims for reimbursement for the use of this material.
<input checked="" type="checkbox"/> <b>Pavment and Cancellation Policy*</b>

### **Registering Additional Players**

Once you have completed the registration for one of your players, you can go to check out or sign up additional players by the following the instructions as described above.


### **Checking Out**

Proceed to Checkout by clicking on the [Go to Checkout](#) button at the bottom (and top) of the screen.



# Payment & Checkout

The Total registration payment due for your player(s) will appear on the upper left of the screen:  
Total Enrollment Fee.




**[View Registration Instructions.](#)**  
 If you have any difficulties please email [SoccerMcL@AOL.com](mailto:SoccerMcL@AOL.com).  
 In an emergency call 703-506-8068.

[Logout](#)

<< Return To Household
<< Return To Players
Help on this Page

Total Enrollment Fee	<input type="text" value="\$200.00"/>	
Amount Paid	<input type="text" value="\$0.00"/>	
Balance	<input type="text" value="\$200.00"/>	
Total Due	<input type="text" value="\$200.00"/>	<input type="button" value="Pay by Check"/>
Invoice #	<input type="text" value="AZE0028239810001"/>	<input type="button" value="View Invoice / Statement"/>
Credit Card #	<input type="text"/>	
Expiration Date (MMYYYY)	<input type="text" value="01"/> <input type="text" value="2008"/>	<input type="button" value="Submit Credit Card Payment"/>
Card Verification #	<input type="text"/>	<a href="#">How to find your Card Verification #</a>

To view and print a complete list of fees and selected training programs click on the View Invoice/Statement button.



**McLean Youth Soccer**  
Winter BallMasters

<b>Name</b>	Eileen Hopkins	admin@mcleansoccer.org
<b>Invoice</b>	AZE0028239810001	
<b>Player</b>	<b>Birth Date</b>	<b>Gender</b>
Hopkins Frank	08/15/1992	M
		<b>Fee</b>
U16+ MPS Travel Winter BallMasters - Sundays		\$100.00
Date : Jan 04, 2009 - Feb 22, 2009		
Time : 4:00PM - 5:15PM		
Location : Spring Hill # 2		
<b>Total For Hopkins Frank</b>		<b>\$100.00</b>
<b>Player</b>	<b>Birth Date</b>	<b>Gender</b>
Hopkins Suzie	06/15/1995	F
		<b>Fee</b>
U14 - U15 MYS Travel Winter BallMasters - Sundays		\$100.00
Date : Jan 04, 2009 - Feb 22, 2009		
Time : 2:30PM - 3:45PM		
Location : Spring Hill # 2		

**Your child's registration is not final until your payment is received.**

You may pay your player registration fees by Check or by Credit Card.

If you wish to pay by Credit Card, enter your information in the Credit Card fields and Click on Submit Credit Card Payment. This website is a secure site.

Please note that the system automatically populates the Billing Address for the Primary Parent/Guardian. If you wish to enter another address, you can clear the current information by un-checking the box to the left of the "Same as Primary Parent/Guardian Address" line, and enter the desired information into the fields below.

If you wish to pay by check, click on the Pay by Check button. Print the Invoice that is displayed on the screen and return it with your check made payable to MYS.

Mailing Address:           MYS  
                                  PO Box 724  
                                  McLean, VA 22101