

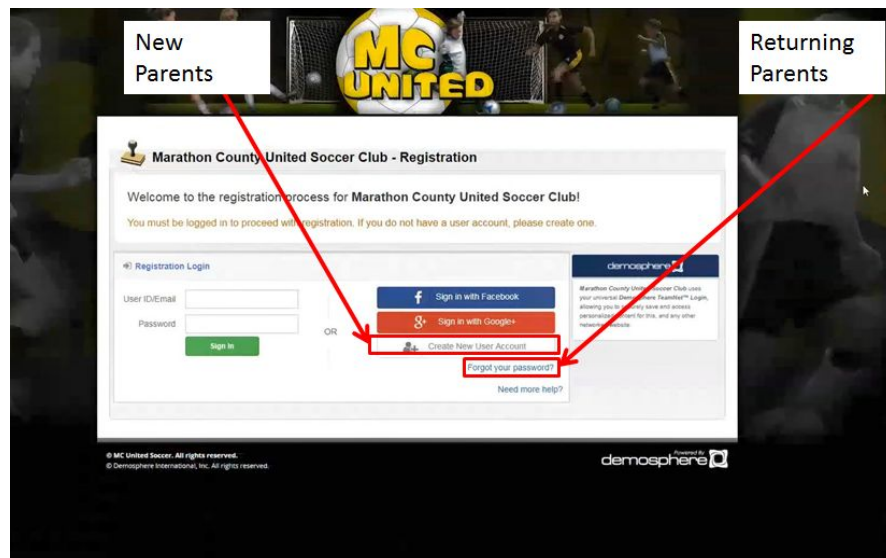
MC UNITED FALL 2018 REGISTRATION INSTRUCTIONS

TO MAKE THE REGISTRATION PROCESS MORE EFFICIENT, BEFORE YOU REGISTER, PLEASE HAVE THE FOLLOWING DOCUMENT(S) READY:

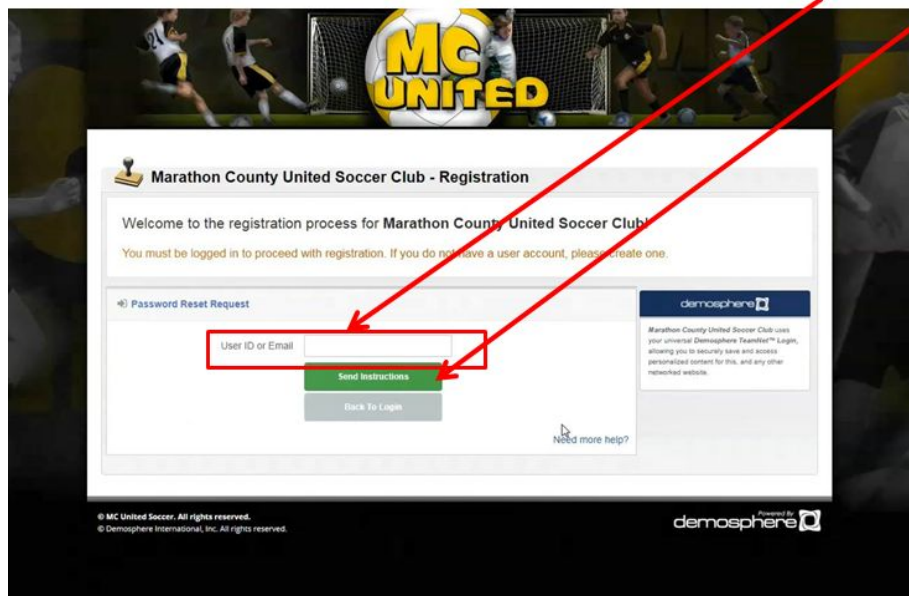
- 1) Digital photo of participant(s)
 - a) Picture of your participant's face - These photos are used for photo IDs
- 2) Digital version free/reduced lunch letter from your school district **IF you applying for a financial scholarship**
 - a) **You can only apply for the scholarship if your participant(s) receive free or reduced lunch at school.**

REGISTRATION

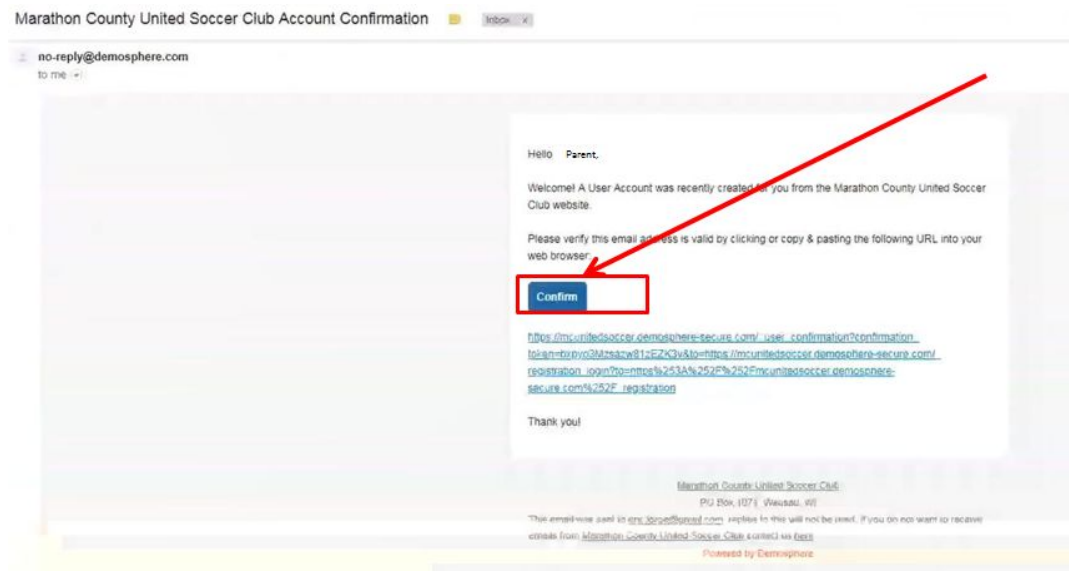
- 1) Click on [REGISTRATION LINK](#). This will take you to MC United's Demosphere Registration Page. See below
- 2) Establishing Accounts:
 - a) Returning Parents: Click on **Forgot your password?** Then move on to step 3.
 - b) New Parents: Click on **Create New User Account**, then skip to step 5.



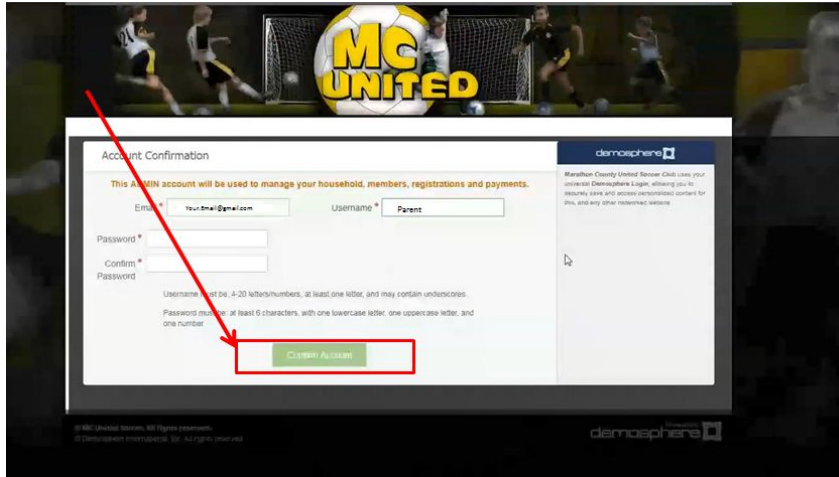
- 3) Returning Parents: After Clicking on the link have, it will take you to the following page. See below. Enter your email address used to register your kids prior seasons and click on **Send Instructions**.



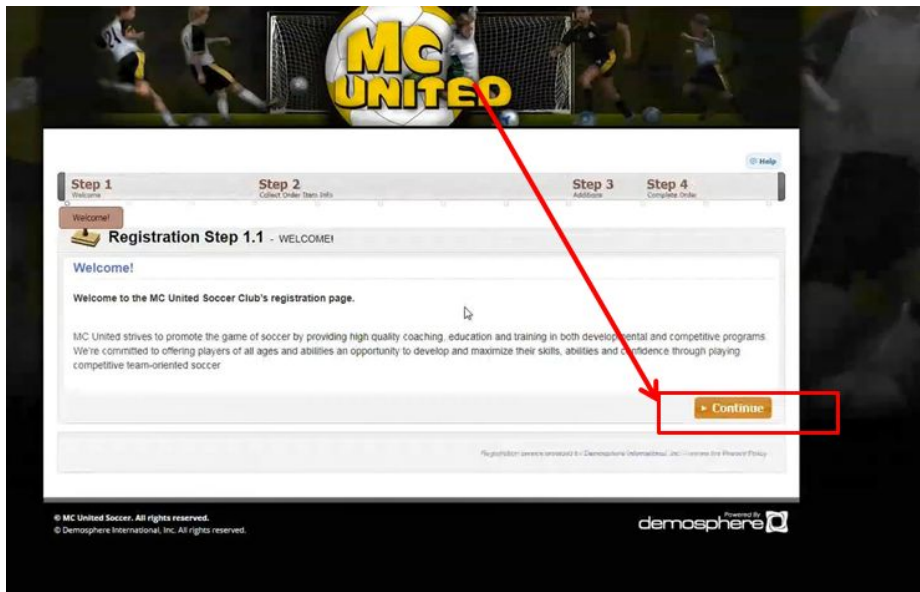
4) Returning Parents: Check the email account and open the email from no-reply@demosphere.com and click on **CONFIRM**.



5) All Parents: Confirm your email address and username. Establish your password then click on **Create Account**



6) Click on **Continue** to begin the registration process.



7) Step 2.1

- a) Select the child/participant you want to register.
- b) Upload photo of your child on this page. You will have the ability to rotate, zoom and pan the photo.
 - i) PLEASE fill the photo area with your child's head and shoulders since they will be used by referees prior to games for identification reasons.
 - ii) For a guideline use the picture on your driver's license or passport.
- c) **NOTE: A picture is required for your child to participate**

Step 1 Previous Step 2 Identify Participant Step 3 Add Info Step 4 Complete Order

Registration Step 2.1 - IDENTIFY PARTICIPANT

Select Household Member to Register

Child 1 Child 2 Child 3 Parent 1 Parent 2

Create New Member

Personal Information

First Name Child 2 Last Name Child 2

Birthdate 02/16/2005 Gender Male Female

Phone #

Change Photo

Back / Edit Save and Continue

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Your Household Members are managed via Demosphere Teamster™, allowing you to securely save and access personalized content across any networked website.

Learn More

7) Step 2.2 From the drop down menu, click on **Classic - Fall 2018**

You are registering: John Doe

Step 1 Previous Step 2 Select Season Step 3 Add Info Step 4 Complete Order

Registration Step 2.2 - SELECT SEASON

Select an Open Registration Season

Select the Season you are registering John Doe (01-01-2000) for:

Classic - Fall 2018

Back / Edit Continue

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8) Step 2.2 cont. Based on the age and gender of your child it should automatically select the correct fee amount. Please confirm this is accurate. Then select **Continue**.

You are registering: John Doe

Step 1 Welcome Step 2 Select Season Step 3 Additions Step 4 Complete Order

Registration Step 2.2 - SELECT SEASON **PREVIEW MODE**

Select an Open Registration Season

Select the Season you are registering John Doe (01-01-2000) for:

Classic - Fall 2018

Based on eligibility, Registrant will be placed into the following Season Grouping:

Boys > U15+ - \$290.00

Seasonal Coaching Fees

U15+ CLASSIC FALL 2018 | \$290.00

Welcome to the MC United Soccer Club's registration page for the FALL 2018 Season.

ALL FAMILIES

- FAMILY DISCOUNT:** Please complete this on-line registration form to register your players for MC United Soccer.
 - Note: In order to receive your family discount, you will need to register **ALL** family members at one time.
- NEWLY REGISTERED PLAYERS ONLY:** At the first practice a birth certificate is required to be shown to the coach and/or team manager to verify age of new player
- UNIFORMS:** Please see the MC United Soccer website if you need to purchase a new uniform. All Players are required to wear a team uniform during games.
- FINANCIAL SCHOLARSHIPS:** MCU Scholarships are available to those families who receive a FREE OR REDUCED lunch through their school district. Digital letter from school district is required to be uploaded during registration to apply.

Back / Edit Continue

9) Step 2.3. Confirm/Update parent and Emergency contact information.

You are registering: John Doe for Fall 2018

Step 1 Welcome Step 2 Collect Order Item Info Step 3 Additions Step 4 Complete Order

Registration Step 2.3 - ADDITIONAL INFORMATION **PREVIEW MODE**

Parent 1 and Parent 2 will be given admin login access to this household with a valid email address

Parent 1

Select Existing Member Create New Member

Select

First Name

Last Name

Email Address

Phone Number

Relationship to Participant

Parent 2

Select Existing Member Create New Member

Select

First Name

Last Name

Email Address

Phone Number

Relationship to Participant

Additional Emergency Contact

Select Existing Contact Create New Contact

Select

First Name

Last Name

Email Address

Phone Number

Relationship to Participant

Back / Edit Save and Continue

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Your Household Members are managed via Demosphere TeamNet™, allowing you to securely save and access personalized content across any networked website.

Learn More

10) Step 2.4. Enter your participant's doctor's information along with medical conditions, allergies and concussion information. Finally answer the question regarding the scholarship question. Note, you will need to upload the School District Reduced/Free Lunch letter here.

You are registering: John Doe for Fall 2018

Step 1 Welcome | Step 2 Collect Order Item Info | Step 3 Add-ons | Step 4 Complete Order

Registration Form

Registration Step 2.4 - REGISTRATION FORM ** PREVIEW MODE **

Fall 2018

Participant Form

Doctor's Name:

Doctor's Phone:

Medical Conditions:

Allergies:

Has this participant sustained a possible concussion or head injury?

MCU Scholarships are available to those families who receive a FREE OR REDUCED lunch through their school district.

Is your Child Applying for a Scholarship?

11) For the Volunteer Form, read and select the volunteer commitment(s) you prefer for this Fall. NOTE: All families are expected to volunteer at least two hours.

Volunteer Form

REQUIRED VOLUNTEER COMMITMENT

MC United requires that each family contribute a minimum of 2 hour each season (4 hours total annually). There are many options for families to fulfill the volunteer service obligation.

Please select one or more of the following. An MC United Board member or committee member will follow-up with you. Thank you for your willingness to help.

- MC United tournament volunteer [slots available for sign-up one month prior to the fall/spring tournaments; includes concessions, field monitoring, set-up, clean-up, team check-in]
- Tournament committee [help plan the club's fall and spring tournaments]
- Marketing committee [help promote the club and our events]
- Sponsorship committee [help secure sponsorship support for our tournament and other events]
- Raffle committee [help coordinate tournament raffle events; secure raffle items/donations, etc.]
- Uniform committee [help staff uniform fitting sessions; collate and distribute uniforms to teams]
- Chicago Fire liaison [help plan club events, camps and programs with the Chicago Fire]
- Winter/off-season training assistance [help coordinate club off-season practices, special training sessions; identify winter indoor tournament opportunities]
- Assistant Coach
- I am already a MCU team coach or assistant coach
- I am already a MCU team manager
- I am already a MCU Board member/volunteer
- I have another specific idea or talent that I'd like to contribute. Please contact me!

Please select the volunteer role(s) that you are interested in:

1st Choice:

2nd Choice:

Name of Volunteer:

Name of Volunteer:

Back / Edit Save and Continue

12) Step 2.5 Review Registration information provided on previous page.

You are registering: **John Doe** for Fall 2018 [Help](#)

Step 1 Welcome **Step 2** Collect Order Item Info **Step 3** Additions **Step 4** Complete Order

Registration Step 2.5 - REVIEW REGISTRATION **Registration Review** **** PREVIEW MODE ****

Review Participant Registration: John Doe 01/01/2000
Fall 2018

Registrant	Registration Info
John Doe Birthdate: 01/01/2000 MALE	Fall 2018

Participant Form

Doctor's Name:

Doctor's Phone:

Medical Conditions:

Allergies:

Has this participant sustained a possible concussion or head injury?

MCU Scholarships are available to those families who receive a FREE OR REDUCED lunch through their school district.

Is your Child Applying for a Scholarship?

13) Step 2.5 continued. Review volunteer information and select **Continue** if everything looks ok.

- Assistant Coach
- I am already a MCU team coach or assistant coach
- I am already a MCU team manager
- I am already a MCU Board member/volunteer
- I have another specific idea or talent that I'd like to contribute. Please contact me!

Please select the volunteer role(s) that you are interested in:

1st Choice:

2nd Choice:

Name of Volunteer:

Name of Volunteer:

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14) Step 2.6. Review the season waiver, if ok, click **I agree to the terms and conditions** then click **Continue**

You are registering: **John Doe** for Fall 2018

Step 1 Welcome **Step 2** Collect Your Team Info **Step 3** Add Info **Step 4** Complete Order

Registration Step 2.6 SEASONAL WAIVER / DOCUMENTS **** REVIEW MODE ****

Seasonal Waiver / Documents

WYSA Player Transfer Policy: Per Wisconsin Youth Soccer Association (WYSA) policy, a player is considered committed to a club for the soccer season/year (8/1 - 7/31) when a written acceptance occurs and a parent/guardian completes the player registration form and submits it to a club representative. If at any time during the registration season/year, a competitive player desires to transfer to another club's team (interclub transfer), a parent/guardian must submit WYSA's competitive player transfer form. In practical terms, this means that any player who registers for MC United for the fall 2018 season who then wants to change to another club at any time before July 31, 2019, including before the spring 2019 season, will be considered a transfer and is subject to WYSA competitive player transfer policies. More information about WYSA's policy can be found here: <https://www.sportsforms.club/wyasa-competitive-player-transfer-request.html>. If your situation meets these criteria, please contact **Mark Schommer** (MCU Boys' Team Formation) or **Dave Drapper** (MCU Girls' Team Formation).

Refund Policy: The completed on-line registration process documents a written offer by MC United Soccer Club to place your player on a team in exchange for the player's commitment to play. Therefore, refunds will only be given to players unable to play the upcoming season because of a season-ending injury. The season-ending injury must have occurred prior to the player's first league or tournament game for the season. Fall and spring seasons are treated as separate seasons. Players who have a season ending injury under these circumstances will be provided a refund of that individual season's registration fees, minus a \$50 administrative fee. The refund request must be made in writing to MC United Soccer Club, PO Box 1071, Wausau, WI 54402-1071.

Participation/Payment: Due to liability issues your child will be allowed to participate in practice, seasonal games and tournaments until full payment is confirmed.

☒ I agree to the above terms and conditions

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15) Step 2.6 cont. E-sign the medical release form. If the participant suffered a concussion an additional signature is needed by a physician. This form can be printed after registration is complete.

Registration Step 2.6 SEASONAL WAIVER / DOCUMENTS **** PREVIEW MODE ****

Seasonal Waiver / Documents

Please review and sign/initial this document.

WISCONSIN YOUTH SOCCER ASSOCIATION
EVENT MEDICAL RELEASE FOR
2018-2019 SEASON

Player's Name: John Doe Date of Birth (MM/DD/YY): 01/01/00
 Gender: MALE Club: MC United Soccer Club
 Parent 1 Name: John Doe Home Phone: (703) 536-1600 Cell Phone: _____
 Parent 2 Name: _____ Home Phone: _____ Cell Phone: _____
 Emergency Contact: Robert Doe Emergency Phone: 555-555-0100
 Doctor: _____ Doctor Phone: _____
 Medical Conditions: _____
 Allergies: _____

IMPORTANT MEDICAL AND LIABILITY RELEASE - MUST BE SIGNED

Recognizing the possibility of injury or illness, and in consideration for the Wisconsin Youth Soccer Association (WYSA), US Youth Soccer and members of US Youth Soccer accepting my son/daughter as a player in the soccer programs and activities of WYSA, US Youth Soccer and its members (the "Programs"), I consent to my son/daughter participating in the Programs. Further, I release, discharge, and otherwise indemnify WYSA, US Youth Soccer, its member organizations and sponsors, their employees, associated personnel, and volunteers, including the owner of fields and facilities utilized for the Programs, against any claim by or on behalf of my player son/daughter as a result of my son's/daughter's participation in the Programs and/or being transported to or from the Programs, which transportation I authorize.

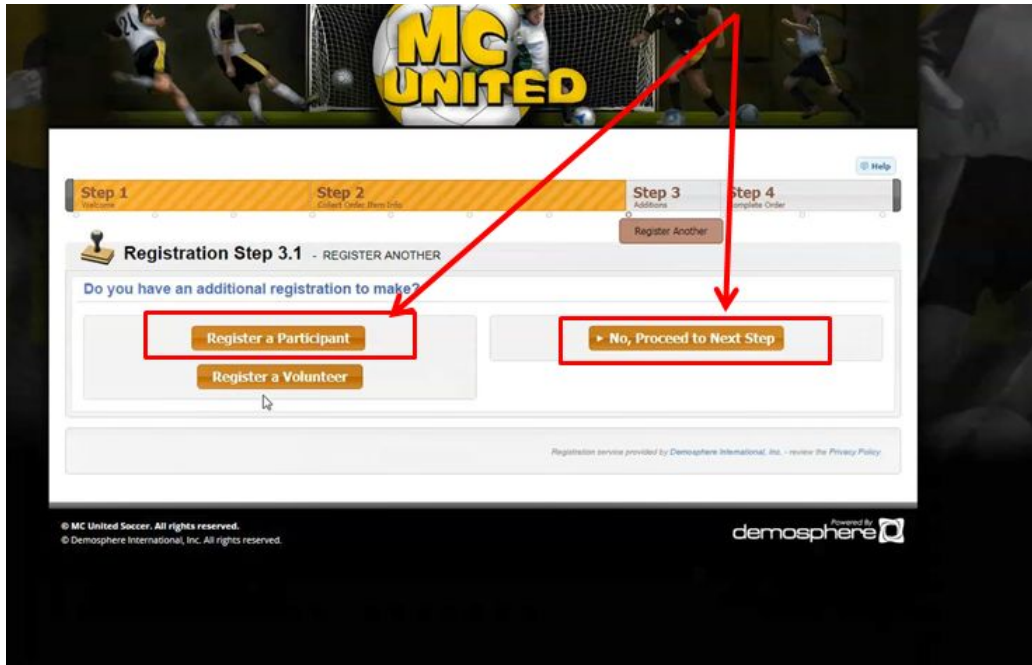
My son/daughter has received a physical examination by a physician and has been found physically capable of participating in the Programs. I give my consent to have an athletic trainer and/or doctor of medicine or dentistry provide my son/daughter with medical assistance and/or treatment and agree to be responsible financially for the reasonable cost of each assistance and/or treatment.

I agree that if it appears that my child may have sustained a concussion or head injury that he or she is to be removed from the competition until such time that a trained medical professional examines them and approve their return to play soccer. In such case, I understand that I am to provide a written clearance for my child to return to play soccer.

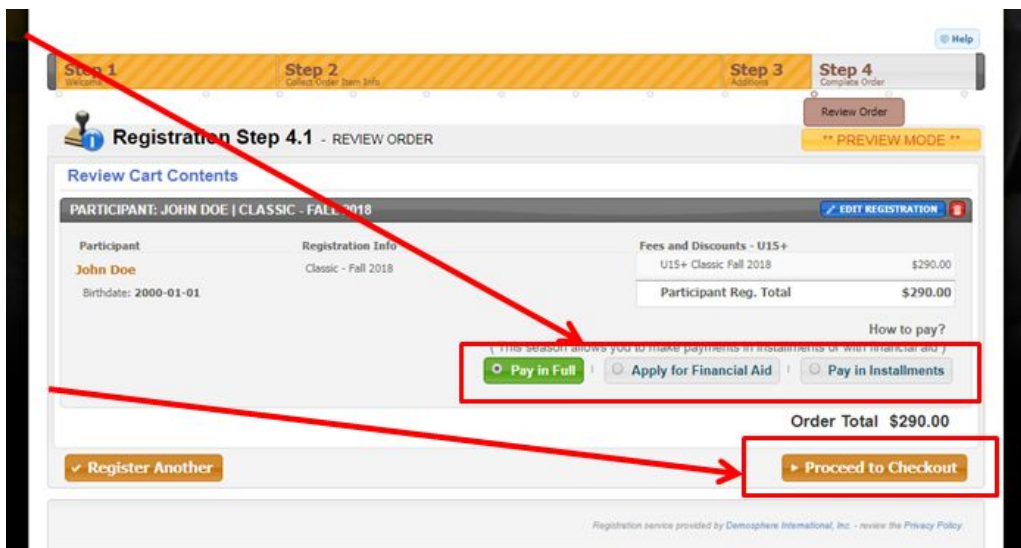
I understand that my child has accepted a position on that team, and completes registration, and will continue to be committed to that team for the season/year (8/1 - 7/31). The WYSA player transfer policy also takes effect at this time.

Signature: _____ Date: _____
 Click here to Sign

16) Step 3.1 - Either register another child or proceed to the next step to check out.



17) Step 4.1 Select one of three options and select **Proceed to Checkout**



18) Step 4.2. Enter payment information and press **Submit Order**.

Registration Step 4.2 - MAKE PAYMENT Make Payment **** PREVIEW MODE ****

Payment Amount

Type	Description	Registration Info	Registration Total
Participant	John Doe	Classic Fall 2018 - U15+	\$290.00
			\$290.00

Payment Information

Select payment type:

Selected Payment Method: Credit Card

Cardholder's Name: First Name Last Name
 Country: United States
 Billing Address: 306 North Washington Street
 City: Falls Church
 State: VA
 ZIP: 22046

Card Number:
 Security Code:
 Expiration: 01 / 2018

Amount to Pay: \$290.00

[Back / Edit](#) [Submit Order](#)

19) Step 4.3 Order confirmation - When have completed registration of your participant(s), either **View/Print Receipt** or **Finish and return to the Dashboard**.

Registration Step 4.3 - ORDER CONFIRMATION Order Confirmation **** PREVIEW MODE ****

Registration Order Complete!

This confirms your participant(s) are now registered.

Additional Seasonal Information

Classic - Fall 2018
 Seasonal Confirmation Info
WHAT TO EXPECT NEXT:

You will be contacted by your participant's coach or team manager in the August timeframe to introduce himself/herself to you and to inform you of the first practice date/time for the Fall Season.

For new participants to MC United:

- A birth certificate will need to be shown at the first practice to the coach/team manager. This is a requirement for all players
- You will be invited to order team uniforms for your participant once the teams have been formed. An email will be sent to the email address provided during registration.

Financial Aid Info
 MC United Registration Team will review the uploaded scholarship-related document(s) and will contact you if there are any questions.

[View/Print Receipt](#) [Finish and Return to Dashboard](#)

If you need assistance, please email Todd Suckow, todd.suckow@gmail.com.