

Sports Engine Registration Instructions

KEY ITEMS TO NOTE:

- Please be sure to select the correct Registration Option
 - 7v7 (2012 and Younger Ages)
 - 9v9 (2010-2011 Ages)
 - 11v11 (2009 and Older Ages)

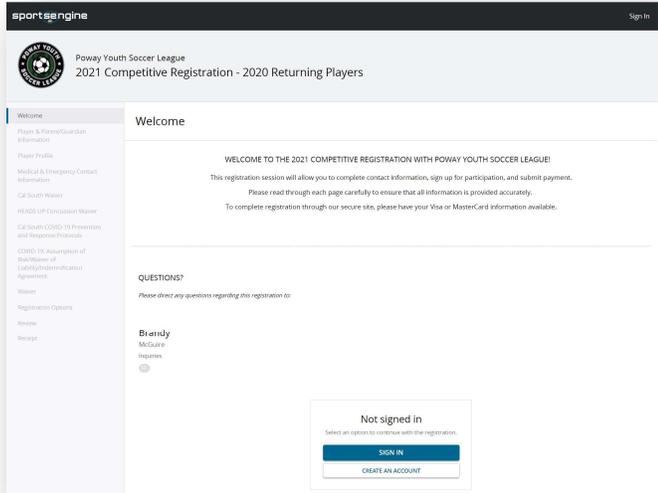


The image shows a screenshot of a registration dropdown menu with four callouts pointing to specific options:

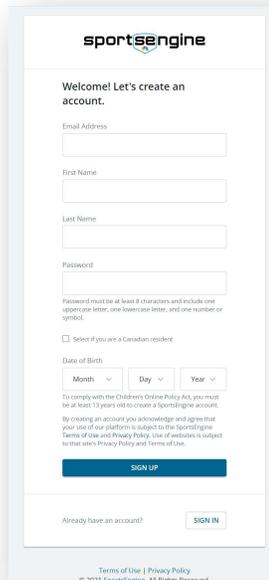
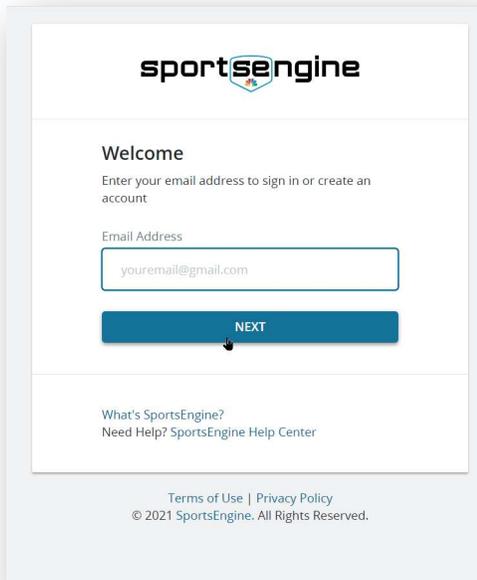
- Registration Year:** Points to the first option: "2021 Competitive Registration RP (11v11 3PP)".
- Returning Player:** Points to the second option: "2021 Competitive Registration RP (11v11 4PP)".
- Birth Year Competitive Bracket:** Points to the third option: "2021 Competitive Registration RP (11v11 5PP)".
- Number of Payments:** Points to the fourth option: "2021 Competitive Registration RP (11v11 7PP)".



1. Click "Create an Account" or "Sign in"



2. If you need to create an account input new account information





3. Click "A New Player"

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Poway Youth Soccer League
 2021 Competitive Registration - 2020 Returning Players

Welcome
 Who Are You Registering?
 Player & Parent/Guardian Information
 Player Profile
 Medical & Emergency Contact Information
 Cal South Waiver
 HEADS UP Concussion Waiver
 Cal South COVID-19 Prevention and Response Protocols
 COVID-19: Assumption of Liability/Indemnification Agreement
 Waiver

Who Are You Registering?

SELECT THE PERSON YOU ARE REGISTERING

A New Player

* First Name:
 * Last Name:

Need Help?

4. Input Player Information

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 Registration System
 Device
 Billing

Player & Parent/Guardian Information

Currently Registering

PLAYER INFORMATION

First Name * Last Name * Player's Nickname (if any)
 Date of Birth * Gender * Male Female
 Clear Current Selection
 School * State * Make Selection
 Email * Email *
 Street Address 1 * Street Address 2 City *
 State of Province * Postal Code * Country *



5. Input Parent/Guardian Information

- a. Please select “Both” for both mother and father information

PARENT/GUARDIAN INFORMATION

Parent/Guardian Information Options *

At least one parent's information is required

Mother

Mother's First Name: *
Mother's Middle Name:
Mother's Last Name: *

Mother's Cell Phone: *
Format xxx-xxx-xxxx

Mother's Home Phone: *
Format xxx-xxx-xxxx

Mother's Work Phone:
Format xxx-xxx-xxxx

Mother's Email: *

Mother 2 Parental/Volunteer Support:
Make Selection

Mother's Job Industry: *
As a nonprofit business we depend on many volunteers. There may be times in which we have questions or need assistance related to a specific industry.
Make Selection

FINANCIAL ASSISTANCE PROGRAM

Financial assistance is available only to a local player. The amounts vary from one family to another and from one year to another. No player will receive an amount to cover full registration fees. Financial assistance is intended for families based on need and will require proof of financial need. No exceptions will be made. A copy of the income tax returns from the previous year of both parents or guardians must accompany this application, W2 forms will NOT be accepted. All families must make the initial \$ 200 non-refundable deposit required, regardless of the financial assistance granted.

6. Input Player Profile information

- a. The Play Type should be “Competitive”
- b. Please input your CalSouth player number when entering an existing player.

Player Profile

Currently Registering:

Play Type: *
Make Selection
Competitive

Are you a returning Cal South player? *
 Yes
 No
 Clear Current Selection

Returning Cal South Player ID Number: *
 [Red arrow pointing to this field]

Weight: *

PRODUCT SIZING INFORMATION

Please take into consideration child's growth through the season when selecting sizes.
 • Girls over the birth year of 2009 will be required to purchase women sizes
 • Nike Sizing Chart: [Men](#), [Women](#), [Youth](#).

Shirt Size: *
Make Selection

Jacket Size: *
Make Selection

Sock Size: *
Make Selection

As a parent or legal guardian of the above registrant, I request their name be removed from the Association's magazine, camp, ODP, and other program mailing list: *
 Make Selection

CONTINUE



7. Input Medical and Emergency Information

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Medical & Emergency Contact Information

Currently Registering:

EMERGENCY CONTACT INFORMATION

In an emergency when parent/guardian cannot be reached, please contact the following:

Emergency Contact First Name: *	Emergency Contact Last Name: *	Emergency Contact Relationship to Participant: *
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Emergency Contact Primary Phone: * <small>Format XXX-XXX-XXXX</small>	Emergency Contact Alternate Phone Number: <small>Format XXX-XXX-XXXX</small>	
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	
Secondary Emergency Contact First Name:	Secondary Emergency Contact Last Name:	Secondary Emergency Contact Relationship to Participant:
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Secondary Emergency Contact Primary Phone: <small>Format XXX-XXX-XXXX</small>	Secondary Emergency Contact Alternate Phone Number: <small>Format XXX-XXX-XXXX</small>	
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	

MEDICAL HISTORY

If applicable, list any medical problems(s)/physical limitation(s) the player has:

Does the player have any other medical conditions that we need to be aware of?: *

Make Selection

CONTINUE



8. Acknowledge and Sign CalSouth Waiver

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- Welcome ✔
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Cal South Waiver

👤 Currently Registering:

We, the registrant and the registrant's legal parent or guardian, hereby agree and acknowledge the following: (1) We agree to abide by the rules of Cal South and its affiliated organizations and sponsors. (2) We recognize the inherent risk of serious or permanent physical injury and possible death associated with youth soccer activities and games. In consideration for Cal South accepting the youth player's registration and participation in its sanctioned youth soccer leagues, tournaments and team travel activities ("Youth Programs"), we hereby release, discharge and/or otherwise indemnify and hold harmless Cal South, its affiliated organizations and sponsors, volunteers, their employees and associated personnel, including the owners of fields and facilities utilized for the Youth Programs, against any claim, lawsuit or written demand, including but not limited to any claims for personal or physical injury or death, by or on behalf of the registrant as a result of the registrant's participation in the Youth Programs and/or being transported to or from the same, which transportation we hereby authorize. (3) We authorize verification of the registrant's date of birth from legal records to be provided to a Cal South authorized representative for the limited purpose of verifying the Cal South player's age and identity. (4) We consent to emergency medical care prescribed by a duly licensed Health Care Provider or Dentist. This care may be given under whatever conditions are necessary to preserve the life, limb or registrant's well-being and we hereby agree to be financially responsible for all costs associated with such treatment. (5) We consent to Cal South taking photographs, video recordings, and/or sound recordings in documenting the activities of Cal South's programs and services. We hereby grant Cal South and their affiliates' permission to use the negatives, prints, motion pictures, video/audio tapings, or any other reproduction of the same for Cal South and its affiliates' educational and promotional purposes in manuals, on flyers, the internet, or other publications. We have read this release and waiver of liability and fully understand its terms. We understand that we waive substantial rights by signing this form. We agree to waive all such rights above including the right to file a legal action or assert a claim for personal or physical injury or death of any kind. We sign this release form freely of our own free will.

Cal South Waiver Agreement:

I/We have read, understand and agree to comply with the Cal South Waiver as outlined above.

CONTINUE



9. Acknowledge and Sign Concussion Waiver

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HEADS UP Concussion Waiver

Currently Registering:

This sheet has information to help protect your children or teens from concussion or other serious brain injury. Use this information at your children's or teens' games and practices to learn how to spot a concussion and what to do if a concussion occurs.

WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

DISCUSS THE RISKS OF CONCUSSION AND OTHER SERIOUS BRAIN INJURY WITH YOUR CHILD OR TEEN AND HAVE EACH PERSON SIGN BELOW.

Athlete Agreement: *

I learned about concussion and talked with my parent or coach about what to do if I have a concussion or other serious brain injury.

Athlete Signature: *

Parent/Guardian Agreement: *

I have read this fact sheet for parents on concussion with my child or teen and talked about what to do if they have a concussion or other serious brain injury.

Parent/Legal Guardian Signature: *

[CONTINUE](#)



10. Acknowledge and Sign CalSouth COVID Prevention and Response Protocols

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Cal South COVID-19 Prevention and Response Protocols

Currently Registering:

CAL SOUTH COVID-19 PREVENTION AND RESPONSE PROTOCOLS

CAL SOUTH COVID-19 PREVENTION AND RESPONSE PROTOCOLS

Overview:

The information in this document is not intended or implied to be a substitute for professional medical advice, diagnosis, or treatment. All content, including text, graphics, images and information, are provided for general informational purposes only. The knowledge and circumstances around COVID-19 are changing constantly and, as such, Cal South makes no representation and assumes no responsibility for the accuracy or completeness of this information. *Further, you should seek advice from medical professionals and/or public health officials if you have specific questions about your return to training and competition.*

In developing these guidelines Cal South incorporated requirements from:

17. Breaks will be organized so that designated Training groups will not intermingle and social distancing of six feet or greater can be achieved.
18. Training groups must abide by the maximum number of players allowed in a "Training Group" based on State and/or Local social distancing guidelines.
19. Designated and separated practice areas and equipment for each Training Group will be pre- positioned to maintain safe social distancing.
20. All equipment will be placed so that it can be retrieved without touching anything but the equipment.
21. Participants will be required to dispose of their own trash into garbage cans.
22. Participants will be required to wash their hands immediately after drills or practice are completed.

Electronic Signature: *

I/We acknowledge receipt of the Cal South COVID-19 Prevention and Response Protocols as outlined above.

Parent/Legal Guardian Signature: *

CONTINUE



11. Acknowledge and Sign CalSouth COVID Waiver

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COVID-19: Assumption of Risk/Waiver of Liability/Indemnification Agreement

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COVID-19: Assumption of Risk/Waiver of Liability/Indemnification Agreement

👤 Currently Registering:

CAL SOUTH WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate in athletic programming, sanctioned activities and events (collectively "Sanctioned Activities") related to the California State Soccer Association-South (Cal South) and affiliate members ("RELEASEES"), the undersigned acknowledges, appreciates, and agrees that:

- Participation in such Sanctioned Activities inherently includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
- I KNOWINGLY AND FREELY ASSUME ALL SUCH INHERENT RISKS, both known and unknown, EVEN IF ARISING FROM THE ACTIVE OR PASSIVE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,

Electronic Signature (Player): *

I/We have read, understand and agree to comply with the Waiver of Liability as outlined above.

Parent/Legal Guardian Signature: *

MINOR AGE CHILD

FOR CAL SOUTH PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I, for myself, my spouse, and child/ward, do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Electronic Signature (Parent): *

I/We have read, understand and agree to comply with the Waiver of Liability as outlined above.

Parent/Legal Guardian Signature: *

CONTINUE

12. Acknowledge and Sign all PVSC Waivers and Agreements

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Waiver

Currently Registering:

PYSL/PVSC WAIVER

WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19 ASSUMPTION OF RISK/ WAIVER OF LIABILITY/ INDEMNIFICATION AGREEMENT

The undersigned is: *

an individual participant/player of Poway Youth Soccer League (PVSC) who is 18 years of age or older.

A parent or legal guardian of a minor (under the age of 18) participant/player of Poway Youth Soccer League (PVSC)

[Clear Current Selection](#)

In consideration for being allowed to participate in athletic activities, programs, and events, including but not limited to on-field practices, clinics, games, tournaments, and scrimmages (collectively "Activities") sanctioned by and related to the Poway Youth Soccer League (hereinafter "Club"),

Electronic Signature: *

I/We have read, understand and agree to comply with the Waiver as outlined above.

Parent/Legal Guardian Signature:

CONDITIONS

By submitting this agreement, I understand that all fees will be paid in full or current as to my agreement. If my fees are not paid and current my child will not be allowed to practice or play with his/her team until the account is current. My child's player card may be pulled by the league thereby preventing my child from playing. All players are required to make a non-refundable deposit at the time of registration. This is a nonrefundable deposit. If a player drops from a team due to injury or relocation after league fees have been paid in full a prorated refund will be paid based on the remaining number of months in the season. Refunds will only be issued after the Cal South team drop process has been completed. The drop process is to be initiated by the parent on the Cal South website. If a player requests to drop for any reason other than injury or relocation NO refund will be issued. Items not considered for refund: Uniform fees, Equipment fees, and Tournament fees.

Electronic Signature: *

I/We have read, understand and agree to comply with the Waiver as outlined above.

Parent/Legal Guardian Signature:

CONTINUE



13. Select your player's team year. Be sure to selected the correct year.
14. Select how many payments you wish to make.

15. Review all Player Registration Information

16. The Shopping cart will now show the registration amount with the set payment dates.

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Shopping Cart

To change your order, edit your answers by selecting edit on the [Review](#) page.

QUANTITY	ITEM	PRICE	TOTAL	PAYMENT OPTIONS	DUE NOW
1	2021 Competitive Registration (7V7 ZPP)	\$1,575.00	\$1,575.00	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">Scheduled Payments ▾</div> \$300.00 charged now \$637.50 charged on 02/15/2021 \$637.50 charged on 03/15/2021	\$300.00
Processing Fee			\$50.25		\$50.25
TOTAL DUE			\$1,625.25	DUE NOW	\$350.25

PROTECT YOUR REGISTRATION FEE INVESTMENT

GET REIMBURSED UP TO 100%

Registration fees are typically non-refundable. The new AIG insurance policy, "Registration Saver" now provides you the opportunity to cover the season fees...or tournament, camp and related travel costs you pay for your child to participate in their sports activities. **Get Reimbursed up to 100% if the participant cannot participate because of injury, illness or other covered peril.**

Insurance provided by

AIG

Yes, I would like to protect my \$1,575.00 registration for just \$110.25.

No, I choose not to protect my \$1,575.00 registration and understand this fee may be non-refundable.

NOTE: if you do not purchase the AIG-Registration Saver policy your fee may be non-refundable.

I have read and understand the [Certificate of Insurance](#) and agree to the [Terms and Conditions](#) of the insurance coverage provided. Full [Disclaimer](#) available.

Regsaver is offered by Next Wave Insurance Services, LLC - CA License #OF00755, in partnership with AIG.



Enter Discount Code:

Apply

CHECKOUT

17. Select your payment method. This will be the method used to process all payments.


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Poway Youth Soccer League
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🔒 Secure payment amount
\$300.00

Payment method

New credit card

New bank account





Card number

Expiration date Security code

Name on card

City

State

Choose state ▾

Country

United States ▾

ZIP code

Pay \$300.00

🔒 Secure payment amount
\$300.00

Payment method

New credit card

New bank account

Account Type

Checking

Savings

Name on Account

Account Number

State

Choose state ▾

Country

United States ▾

ZIP code

Pay \$300.00