

Yarmouth Colts Soccer Club – 2021 Fall Travel Season – Registration Process

https://system.gotsport.com/programs/246681C47?reg_role=player

PLEASE NOTE: in the following screen shots, it says “Yarmouth Colts Fall Soccer 2020”...I am just reusing the screen shots from last year because it is basically the same process. The only difference is in the “FORMS” section and I have made a note about it below with a new screen shot.

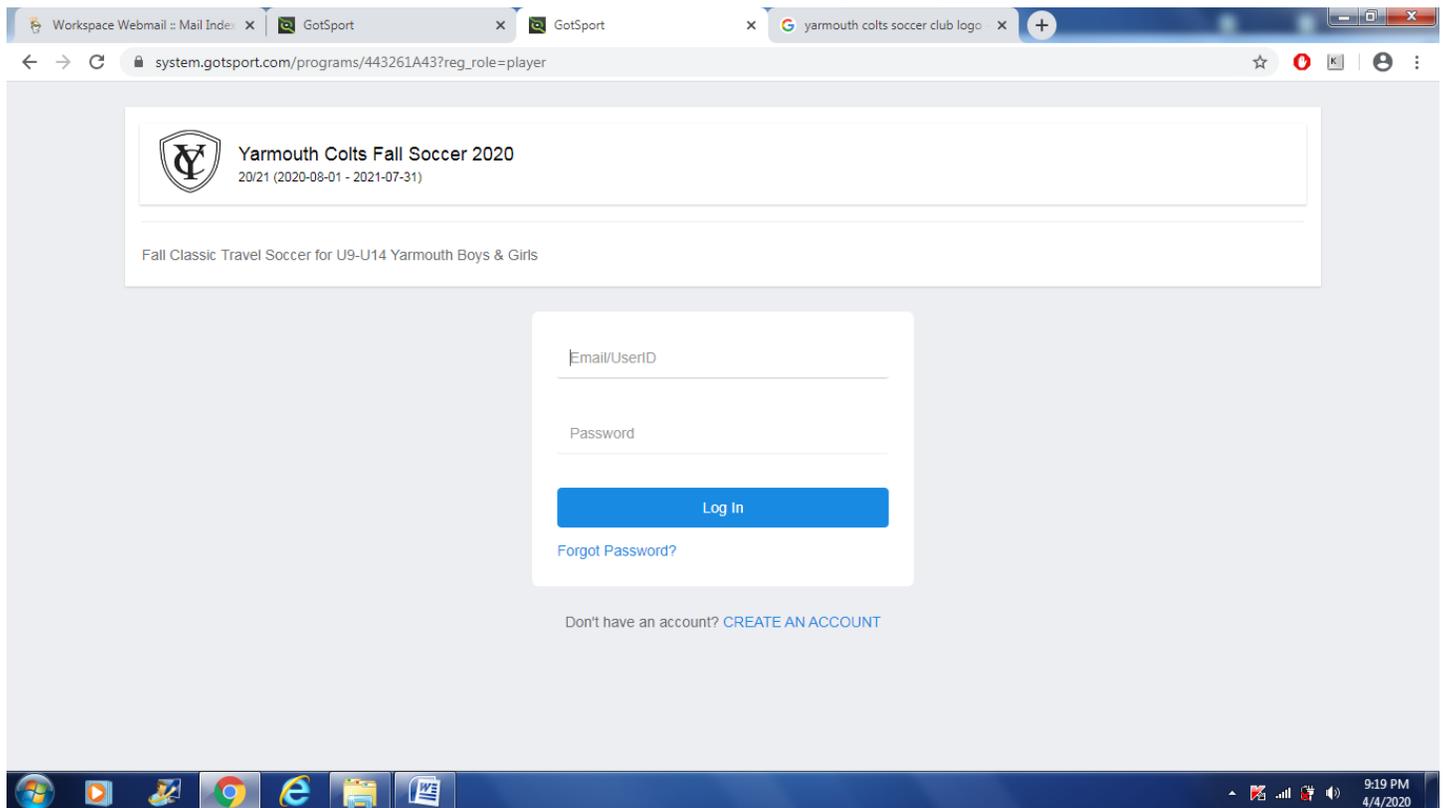
This registration process, and the system.gotsport.com platform used for it (aka website), are new as of last year. If you registered last year with the Yarmouth Colts Soccer Club, you used this new platform and the process for this year is almost identical. You can click on the link above and proceed to Step 4.

If this is your first time registering with the Yarmouth Colts Soccer Club, or first time in 2 years, you will need to create a new account. The old system login credentials (from gotSPORT.com) will not work. Once you have created the account, you can add/register player(s). The benefit of this system is you can have multiple players on one account as opposed to having an individual account for each player.

Here is how you create the initial account:

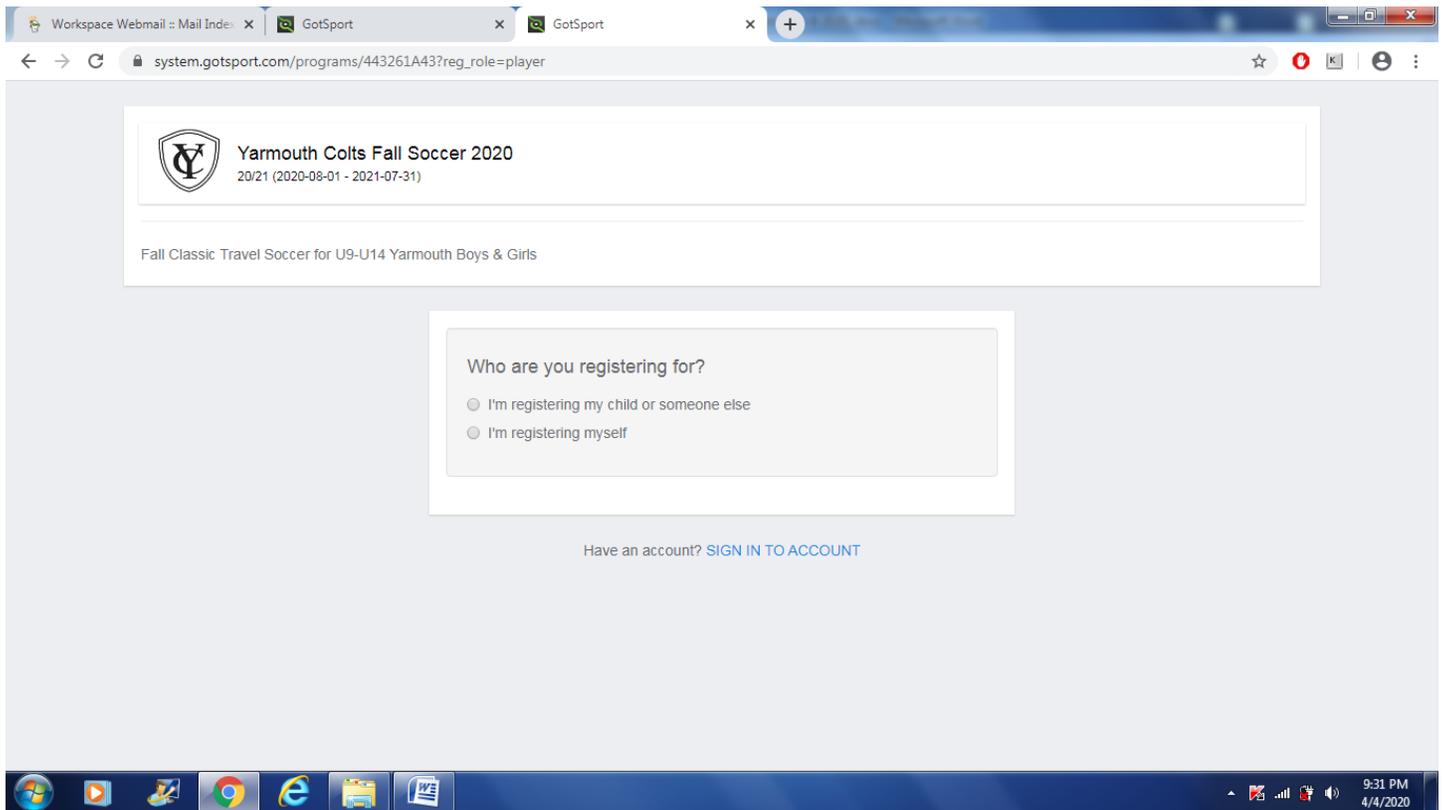
Step 1

Using the link above, bring up main page of system.gotsport.com for the Colts



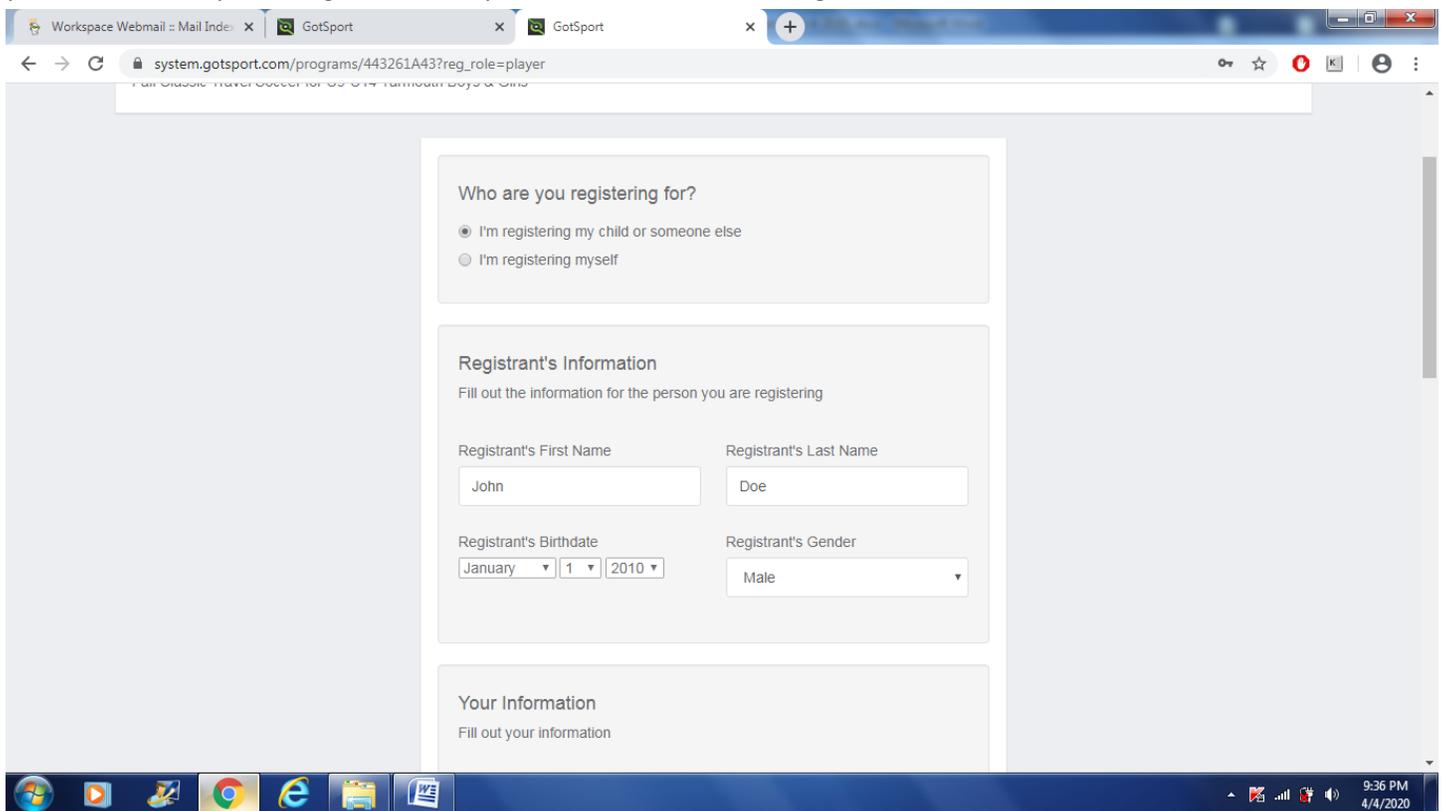
Step 2

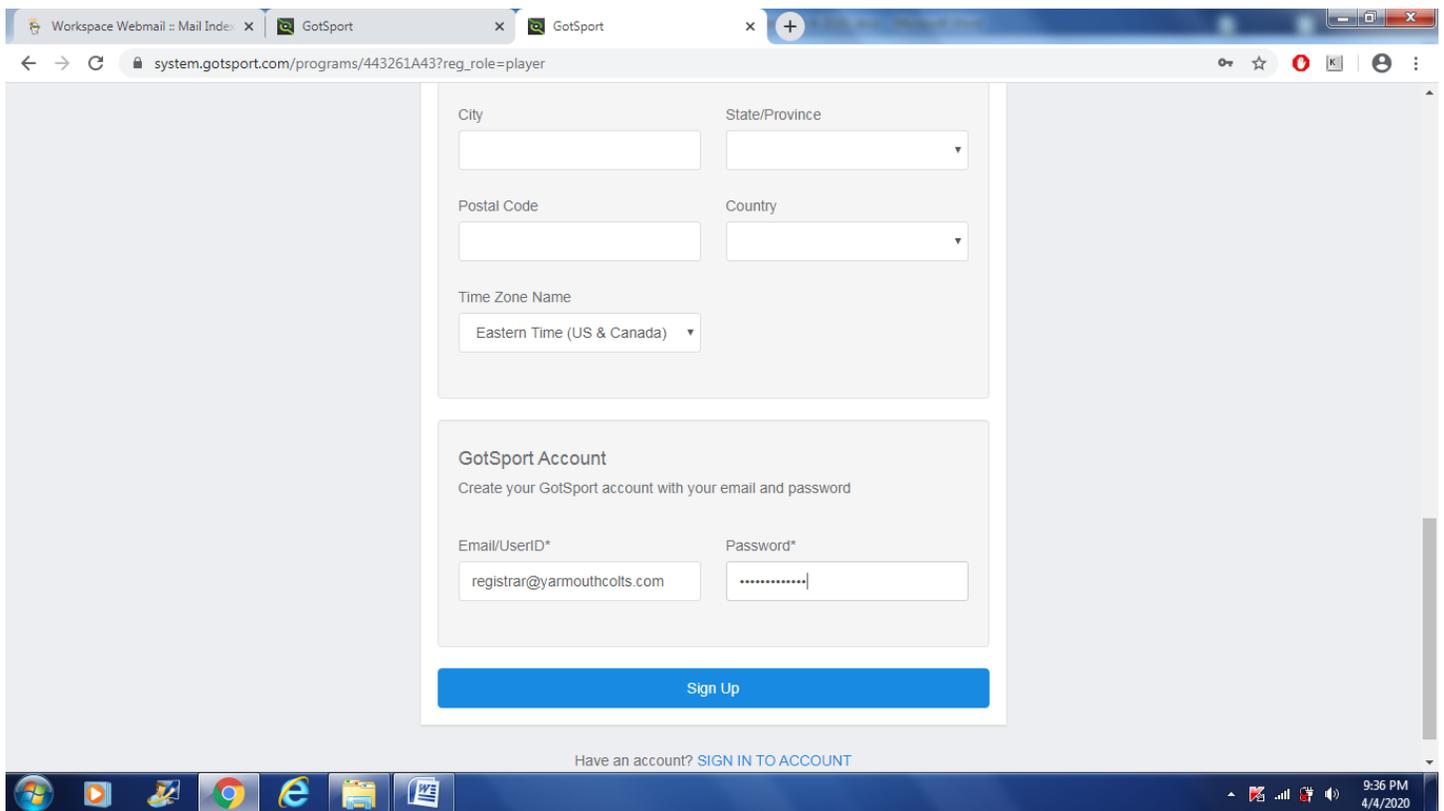
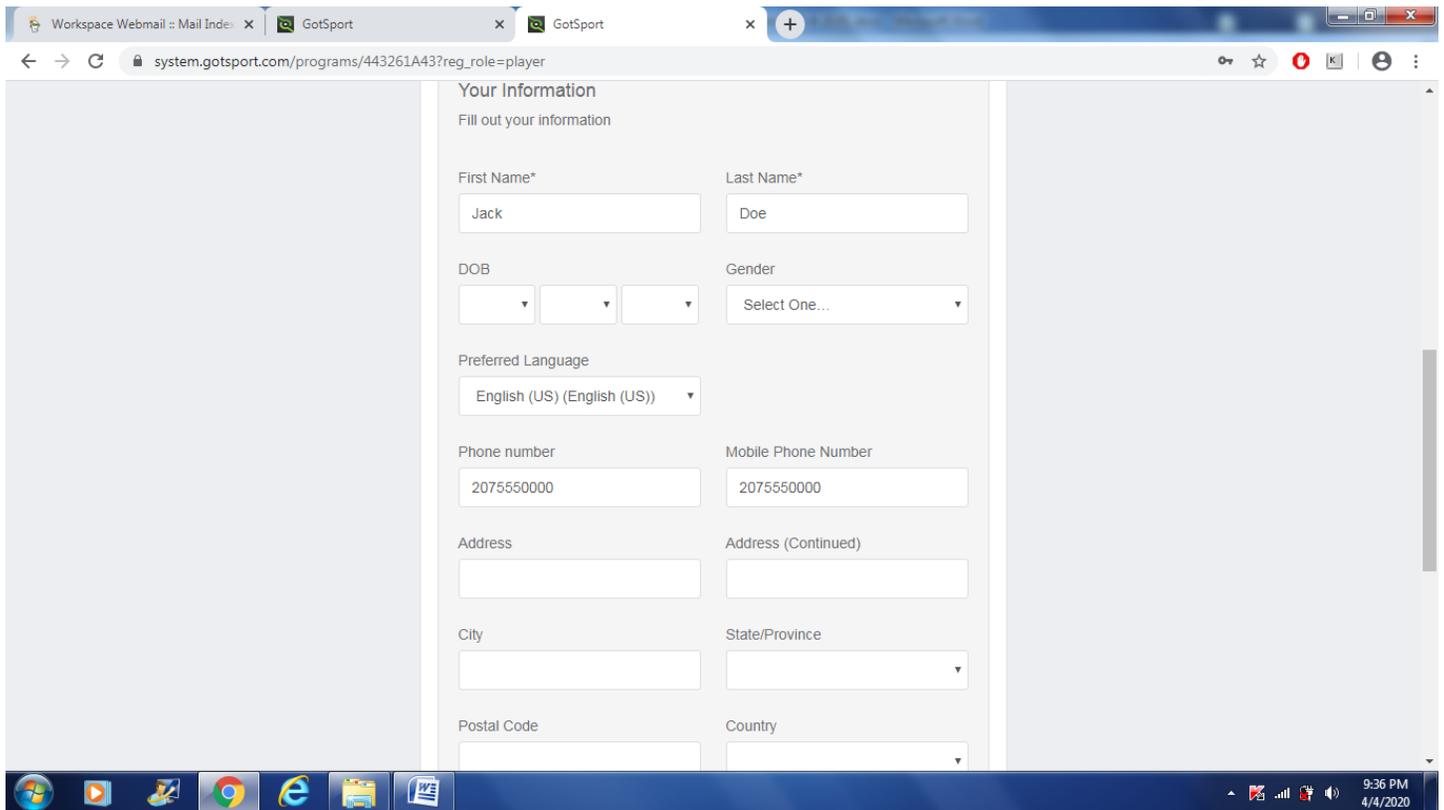
Click on “CREATE AN ACCOUNT” on the bottom of the page



Step 3

Check option "I'm registering my child or someone else" and begin to fill out the information and click "Sign Up". NOTE: you can create a specific login ID, or use your email address as the login ID.





Step 4

You have now created an account for a player, you must register them for the appropriate league/program. Click "Register" beside the name of the player you wish to register and select "Player" from drop down arrow. In the example below, John Doe is the player and Jack Doe is the parent.

Workspace Webmail :: Mail Index x GotSport x GotSport

system.gotsport.com/programs/443261A43



Yarmouth Colts Fall Soccer 2020
20/21 (2020-08-01 - 2021-07-31)
Jack Doe

Cart (0)

Fall Classic Travel Soccer for U9-U14 Yarmouth Boys & Girls

Register

Click the "Register" button to register that person. If you want to register someone that is not in this list, click "Add Family Member".

+ Add Family Member Register ▾



Jack Doe
registrar@yarmouthcolts.com

Register ▾



John Doe

Register ▾

9:39 PM
4/4/2020

Step 5

If this is a registration of returning player, please verify the existing information is correct. Otherwise, if new player, then please fill out the information and you have to select Country before you can select State/Province, click "Save"

Workspace Webmail :: Mail Index x GotSport x GotSport

system.gotsport.com/programs/443261A43/enrollees/35937/edit?reg_role=player



Yarmouth Colts Fall Soccer 2020
20/21 (2020-08-01 - 2021-07-31)
Jack Doe

Cart (0)

Profile
Parents
Emergency Info
Registration
Payment



John Doe
[Change User](#)

*Denotes Required Field



Photo
 No file chosen

Player First Name*

Player Last Name*

Player UserID/Email Address ⓘ

Player Contact Email*

Player DOB*

January ▾

1 ▾

2010 ▾

Player Gender

Male ▾

9:41 PM
4/4/2020

January 1 2010 Male

Player Preferred Language
English (US) (English (US))

Time Zone Name
Eastern Time (US & Canada)

Phone number* 2075550000 Mobile Phone Number* 2075550000

Address* 123 Fake Street Address (Continued)

City* Yarmouth State/Province* Maine

Postal Code* 04096 Country United States

Save

Step 6

Click on "Continue" once all of the parents/guardians have been entered

Yarmouth Colts Fall Soccer 2020
20/21 (2020-08-01 - 2021-07-31)
Jack Doe

Cart (0)

Profile Parents Emergency Info Registration Payment

John Doe
Change User

Add Parent/Guardian Parents/Guardians

New User Select Doe, Jack registrar@yarmouthcolts.com

Continue

Step 7

Fill-out Enter Emergency Contact and Medical information sections. Fill-out Physician and Insurance information if readily available. Click "Continue"

Workspace Webmail :: Mail Index x GotSport x GotSport

system.gotsport.com/programs/443261A43/emergency_infos?user_id=35937

Yarmouth Colts Fall Soccer 2020
20/21 (2020-08-01 - 2021-07-31)
Jack Doe

Cart (0)

Profile Parents **Emergency Info** Registration Payment

John Doe
Change User

EMERGENCY CONTACT ONE

First Name* Last Name*
Jane Doe

Phone Number* Alternate Phone Number
2075551111

EMERGENCY CONTACT TWO

First Name Last Name

Phone Number Alternate Phone Number

MEDICAL INFORMATION

Allergies*

Workspace Webmail :: Mail Index x GotSport x GotSport

system.gotsport.com/programs/443261A43/emergency_infos?user_id=35937

Allergies*
Peanuts

Medical Conditions*
N/A

PHYSICIAN

Physician First Name Physician Last Name
Dr. Yarmouth Colts

Physician Phone Number Alternate Phone Number
2075552222

INSURANCE

Medical Insurance Provider Insurance Provider Phone
Medicare 800555000

PHYSICIAN

Physician First Name: Dr. Yarmouth
 Physician Last Name: Colts
 Physician Phone Number: 2075552222
 Alternate Phone Number:

INSURANCE

Medical Insurance Provider: Medicare
 Insurance Provider Phone: 800555000
 Policy Holder First Name: Jack
 Policy Holder Last Name: Doe
 Policy Number: 0123456789

[Continue](#)

Step 8

NOTE: this section is slightly different than 2020 Fall Travel registration. Besides the Soccer Maine Medical Release Form, there should be a “2021 YC COVID19 WAIVER” from the Yarmouth Colts Soccer Club and a “COVID-19 WAIVER” from Soccer Maine to be signed before registration can be completed.

Click “Start” to complete the form, sign on bottom and click “Save”

Yarmouth Colts Fall Soccer 2020
 20/21 (2020-08-01 - 2021-07-31)
 Jack Doe

Cart (0)

Profile > Parents > Emergency Info > **Registration** > Payment

Soccer Maine Medical Release Form
 Soccer Maine

[Start](#)

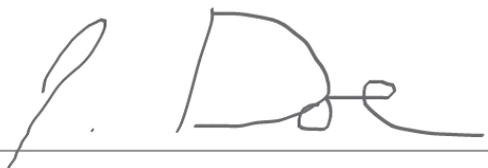
PARENT/GUARDIAN CONSENT AND MEDICAL RELEASE

Recognizing the possibility of injury or illness, and in consideration for US Youth Soccer and members of US Youth Soccer accepting my son/daughter as a player in the soccer programs and activities of US Youth Soccer and its members (the “Programs”), I consent to my son/daughter participating in the Programs. Further, I hereby release, discharge, and otherwise indemnify 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. I hereby authorize the transportation of my son/daughter to or from the Programs.

My player son/daughter has received a physical examination by a licensed medical doctor and has been found physically capable of participating in the sport of soccer. I have provided written notice, which is submitted in conjunction with this release and attached hereto, setting forth any specific issue, condition, or ailment, in addition to what is specified above, that my child has or that may impact my child’s participation in the Programs. I give my consent to have an athletic trainer and/or licensed medical doctor or dentist provide my son/daughter with medical assistance and/or treatment and agree to be financially responsible for the

release, discharge, and otherwise indemnify 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. I hereby authorize the transportation of my son/daughter to or from the Programs.

My player son/daughter has received a physical examination by a licensed medical doctor and has been found physically capable of participating in the sport of soccer. I have provided written notice, which is submitted in conjunction with this release and attached hereto, setting forth any specific issue, condition, or ailment, in addition to what is specified above, that my child has or that may impact my child's participation in the Programs. I give my consent to have an athletic trainer and/or licensed medical doctor or dentist provide my son/daughter with medical assistance and/or treatment and agree to be financially responsible for the reasonable cost of any such assistance and/or treatment.



Please Sign Above Clear

[Save \(Page 1 of 1\)](#)

Workspace Webmail :: Mail Index x GotSport x + system.gotsport.com/programs/443261A43/prerequisite_forms/599346J38/form/1?program_registration_id=4300 9:55 PM 4/4/2020

Step 9

Click "Continue" when Soccer Maine Release Form is completed (the Yarmouth Colts and Soccer Maine forms will be listed here as well)

Workspace Webmail :: Mail Index x GotSport x + system.gotsport.com/programs/443261A43/prerequisite_forms?program_registration_id=4300 9:56 PM 4/4/2020

**Yarmouth Colts Fall Soccer 2020**
20/21 (2020-08-01 - 2021-07-31)
Jack Doe Cart (0)

Profile > Parents > Emergency Info > **Registration** > Payment

 **John Doe** (01/01/2010)
[Change User](#)

 Soccer Maine Medical Release Form
Soccer Maine Complete

[Continue](#)

Workspace Webmail :: Mail Index x GotSport x

system.gotsport.com/programs/246681C47/prerequisite_forms?program_registration_id=450659

Yarmouth Colts Fall Soccer 2021 Registration Information
21/22 (2021-08-01 - 2022-07-31)
James Mccaskill

Cart (0)

Profile Parents Emergency Info **Registration** Payment

Hattie Mccaskill U12 (07/10/2010)
Change User

2021 YC COVID19 Waiver Yarmouth Colts SC Start

COVID-19 WAIVER Soccer Maine Start

Soccer Maine Medical Release Form Soccer Maine Complete

Continue

1:46 PM 4/4/2021

Step 10

Click "Select" to choose payment option

Workspace Webmail :: Mail Index x GotSport x

system.gotsport.com/programs/443261A43/registrations/4300/payment_plan

Yarmouth Colts Fall Soccer 2020
20/21 (2020-08-01 - 2021-07-31)
Jack Doe

Cart (0)

Profile Parents Emergency Info Registration **Payment**

John Doe (01/01/2010)
Change User

YARMOUTH COLTS 2020 FALL EARLY BIRD

Initial Fee	\$150.00
Total	\$150.00

Allows Credit Debit Payments
 Allow Check/MO Payments

Select

9:57 PM 4/4/2020

Step 11

Click "Checkout"

Workspace Webmail :: Mail Index x GotSport x

system.gotsport.com/programs/443261A43/cart

Yarmouth Colts Fall Soccer 2020
20/21 (2020-08-01 - 2021-07-31)
Jack Doe

Cart (1)

Cart

Item	Quantity	Price
John Doe PLAYER	1	\$150.00

Select Different Plan

Register Someone Else

Checkout

9:58 PM 4/4/2020

Step 12

Check box, select payment method and click "Register"

Check/MO – click "Register"

Workspace Webmail :: Mail Index x GotSport x

system.gotsport.com/programs/443261A43/checkout

Cart / Checkout

Fill out form to complete registration

Charged Today	\$150.00
Charged Later	\$0.00
Total	\$150.00

Select payment method

Check/MO

Payment Terms

I agree to the payment amount and structure laid out on this page

Yes, I agree

Register

DUE TODAY

Program Registration - John Doe - Player	\$150.00
Total	\$150.00

DUE LATER

Total	\$0.00
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WAITLIST

Total	\$0.00
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10:01 PM 4/4/2020

Credit Card – fill out information and click “Pay”

The screenshot shows a web browser window with the URL `system.gotsport.com/programs/443261A43/checkout`. The page is divided into two main sections: a form on the left and a summary on the right.

Form Section:

- Select payment method:** A dropdown menu with "Credit Card" selected.
- Credit Card Information:**
 - Credit Card Number:** A text input field with "Card Number" as a placeholder.
 - Expiration Date:** A text input field with "MM/YYYY" as a placeholder.
 - Cvc Code:** A text input field with "CVV" as a placeholder.
- Payment Terms:**
 - A checkbox labeled "Yes, I agree" is checked.
 - A blue "Pay" button is located at the bottom of the form.

Summary Section (Right):

- Total:** \$150.00
- DUE LATER:** Total \$0.00
- WAITLIST:** Total \$0.00

The Windows taskbar at the bottom shows the time as 1:18 PM on 4/10/2020.

Step 13

Registration is complete. Click “Continue to My Account” to take you to your account.

The screenshot shows the account summary page with the URL `system.gotsport.com/programs/443261A43/summary?account_id=3420`. The page displays account details, a balance summary, and a list of invoices.

Account #3420 - Jack Doe
Contact Email: `registrar@yarmouthcolts.com`
Description: Yarmouth Colts Fall Soccer 2020

[Check/MO](#) [Change Payment Method](#)

TOTAL BALANCE: \$150.00 | **DUE NOW:** \$0.00

Invoices Total: \$150.00

ID	Date Due	Description	Auto Pay	Auto Pay Complete	Amount
6887	04/05/2020	Program Registration - John Doe - Player	✓	No	\$150.00

Payments Total: \$0.00

[Continue to My Account](#)

The Windows taskbar at the bottom shows the time as 10:03 PM on 4/4/2020.

Once in your account, you can sign-out on the top right by clicking on the silhouette and clicking “Logout”

If you run into any issues, or have any questions, please let us know.

info@yarmouthcolts.com

Thanks!

Yarmouth Colts Soccer Club