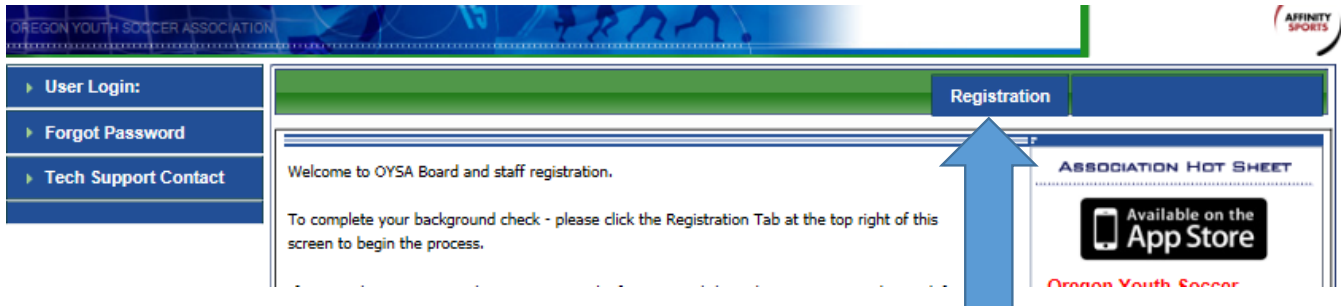
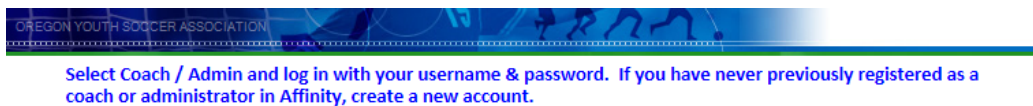


# Background Checks

You will need to give out your clubs Domain Address (URL). You can find your club's URL under Club/Club Config. Click on the Registration tab at the top right of your screen.



Coaches/Administrators will now start registration via online. If they are already in the system, they will input their login information by entering their User Name and Password and clicking on Login. If they do not know their login information, have them contact Desia Bramel at OYSA, [desia@oregonyouthsoccer.org](mailto:desia@oregonyouthsoccer.org). **DO NOT TRY TO CREATE A NEW ACCOUNT.** If they are new to the system, they will create new account. Registrants can use the new Spanish Translation Option. The following examples will be using Option 1 for a RETURNING USER. Make sure that the correct season year is open.



To reset your username & password, click on the link below to have this emailed to you.

<< Back to Main Page ➔ Traducir en Español

Tip: Hover your mouse over the 'Help' icons to get useful information! ?

Select registration type(s) ?

Select a season: \*

Fall 15-16 ▼

Select registration type(s): \*

Coach / Admin Registration

\* are required fields

Returning users, please login. ?

Remember to select a season & registration type before logging in!

Enter Username\*

Username

Enter Password\*

Password

[Forgot Username or Password?](#)

Login

Don't have an Account?

Create New Account

The applicant should see their family information listed below. If all is correct, choose the Continue button.

Once you have completed your details, click the continue button below to finish your registration.

[Traducir en Español](#)

1. Add Family Member >> 2. Create Registration >> 3. Accept ELA >> 4. Make Payment >> 5. Print Form >>

**Account Primary Contact**

**Name:** OYSAParent Test  
**Address:** Address Unknown, OR 97000  
**Phone:** (503) 555-5555(h)  
**Email:** [support@affinitysoccer.com](mailto:support@affinitysoccer.com)

Please add all your missing family members who need to be registered now or later. All added Name, DOB, Emails cannot be altered during online registration. If parents have different contact info, click Edit to change the info. Once all members are added, then Click Continue and go to Create Registration page.

To switch the primary contact, please click [Switch Primary](#).

**Add All Your Family Members To Be Registered**

If there is no family member to be added, please click continue.

Add New Player
Add New Parent/Guardian
Continue >>

Name	IDNum	DOB	Gender	Relationship	Edit
OYSAParent Test	56889-591938		F	Mother	<a href="#">Edit</a>
OYSAPlayer Test	61865-779654	01/28/2001	M	Player	<a href="#">Edit</a>

Click on the Register as Coach/Admin next to applicant's name.

[Traducir en Español](#)

1. Add Family Member >> 2. Create Registration >> 3. Accept ELA >> 4. Make Payment >> 5. Print Form >>

**Register Only Members Who Participate This Season ( Fall 15-16 )**

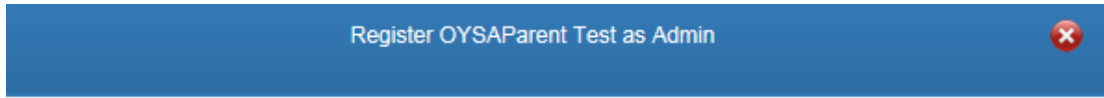
Name	ID Num	DOB	Relationship	Registration
OYSAParent Test	56889-591938		Mother	<a href="#">Register as Coach/Admin</a>
OYSAPlayer Test	61865-779654	01/28/2001	Player	--

If you would like to add additional family members please click the back button.

<< Back

**Please register at least one family member above to Continue**

Choose from the drop down menu either Comp or Rec. This choice does not prohibit where the coach will be placed.



**OYSAParent Test**

**Select Play Level**

Play Level\*

Select one



.....

.....



\*Required      \*\* Just One Required

Once the Play Level is chosen, their applicants information will appear. All prior information will automatically be filled in from prior years. Please make sure that all information is up to date including expiration date of driver's license and Association questions. When all information is complete, choose the Save and Next Page button.



### OYSAParent Test

#### Select Play Level

Play Level\*

Recreation



#### Personal Information

First Name\*

Initial

Last Name\*

Suffix

OYSAParent

Test



Gender\*

Female



Birthdate\*

September



17



1970



Click here to show photo or certification upload

#### Address Information

Address Line1\*

Address

Address Line2

City\*

State/Province\* Zip/Postal Code\*

Unknown

OR



97000

Home Phone\*\*

503 5555555

Cell Phone\*\*

Work Phone\*\*

Fax

Email Address\*

support@affinitysoccer.com

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**Admin Information**

Years Coaching Experience

Coaching License #

Additional Admin Information Required:

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**ID Information**

ID Type

Drivers License

Drivers License Number\*

State\*

OR

ID Expiration  
Date

Month (mm)\*

Day (dd)\*

Year (yyyy)\*

---

**Association Additional Information**

Have you ever been convicted of a Crime Against a Person?\*

No  Yes

Have you ever been convicted of Crime of Violence?\*

No  Yes

Ever been convicted of any Crime (Includes Misdemeanors)?\*

No  Yes

Do you have any Pending Criminal Charges?\*

No  Yes

Denied, disqualified or removed from participation in any youth or sports organizations?\*

No  Yes

If Yes to any of these questions, email explanation to [brian@oregonyouthsoccer.org](mailto:brian@oregonyouthsoccer.org)

Acknowledged

N/A

---

Save & Register Another

Save & Next Page

Cancel

\*Required

\*\* Just One Required

You will now see that the applicant's registration process is "Registering Now". Choose the continue button.

Traducir en Español

1. Add Family Member >> 2. Create Registration >> 3. Accept ELA >> 4. Make Payment >> 5. Print Form >>

Register Only Members Who Participate This Season ( Fall 15-16 )

Name	ID Num	DOB	Relationship	Registration
OYSAParent Test	56889-591938	09/17/1970	Mother	Registering Now
OYSAPlayer Test	61865-779654	01/28/2001	Player	--

If you would like to add additional family members please click the back button.

<< Back

Continue >>

List Of Registrations Just Created

Name	IDNum	DOB	PlayLevel	AgeGroup	RegType	Remove
OYSAParent Test	56889-591938	09/17/1970	Recreation		AD	Remove

The next screen is the organizations Electronic Legal Agreements. These all need to be accepted by checking each box and then Agree and Continue at the bottom.

**Accept ELA**

---

**1 of 4 ELA for OYSA SSN Information Background Checks**

A SSN is required to allow access to some court records (primarily in California) that are keyed to the SSN of the persons involved in the court's action. It may also be needed to resolve identity issues when discovered criminal records could apply to more than one person.

If we ask you to give us your SSN to complete your background check, and you do not provide it, your eligibility to participate in OYSA programs will be delayed. Adults whose risk management status is set at anything other than "Approved" are not eligible to participate. During the period of time that our background check provider must wait to receive your SSN your risk management status will be shown as "Under Review" and no one, whether your club registrar or the OYSA registrar, will be able to print a member card for you or assign you to duties with your club.

**I Accept**

**Security**  
We are very conscious of the need for security in handling your SSN. While the Affinity server is designed to require password protected access to personal information, we will not include your SSN in your Affinity record. The background check provider does

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**2 of 4 ELA for OYSA Background Checks**

Oregon Youth Soccer requires that all adults who work with children on behalf of the Association or any of its member clubs have successfully passed a background check before beginning such work. This requirement applies to all coaches, assistant coaches, employees, board members, chaperones, drivers, team managers, trainers and any other individuals who control the activities of children or who may have an opportunity to be alone with any child other than their own as a representative of the soccer organization.

**I understand that:**  
(A) Oregon Youth Soccer may deny eligibility to any person who has been convicted of a crime against a person or property.  
(B) Any convictions will be evaluated based on the age of the conviction and the nature of the offense.  
(C) Felonies, crimes of moral turpitude, crimes of violence, crimes against a child, and crimes involving a child will be given greater scrutiny.  
(D) Oregon Youth Soccer will suspend any registered person who becomes a defendant in litigation detrimental to the welfare of youth players or litigation based on activities detrimental to the welfare of youth players.  
(E) Risk management decisions of Oregon Youth Soccer that deny eligibility to participate or suspend a person from participation may

**I Accept**

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**3 of 4 ELA for OYSA Disclosure Requirements**

I agree that if I am approved as an Administrator, I will notify the Oregon Youth Soccer Association Risk Management Coordinator, and the risk management coordinator of any club for which I am an Administrator, coach, or team official, if I am charged with, or convicted of, any crime at any time during the seasonal year for which I am registered.

I understand that if a later background check discloses pending charges or a conviction that I have willfully failed to disclose, I will be disqualified for a period of not less than one year in addition to any other disqualification or suspension that may be imposed because of the charges or conviction.

**I Accept**

---

**4 of 4 ELA for OYSA Concussion Fact Sheet**

I understand that by accepting this ELA I am verifying that I have reviewed the concussion information below. I further agree to review the Concussion Fact Sheet that will be available to me after my registration and I will complete any additional concussion training required by the club to which I am applying.

**WHAT IS A CONCUSSION?**

A concussion is a brain injury, and is caused by a bump or blow to the head OR body. Even a "ding" or what seems to be a mild bump can be serious. You cannot see a concussion, like you can see a broken bone. The only way to know if a player has sustained a concussion is to pay attention to any signs and symptoms that a player may report or exhibit. Signs and symptoms of concussion (listed below) can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If your notice any symptoms of concussion, seek medical attention.

**I Accept**

**WHAT ARE THE SIGNS AND SYMPTOMS OF A CONCUSSION?**


---

Your First Name\*      Your Last Name\*

<< Back

Print

Agree & Continue >>






Have your coaches/board members choose “No Payment Due, Continue”.

[Traducir en Español](#)

1. Add Family Member >> 2. Create Registration >> 3. Accept ELA >> 4. Make Payment >> 5. Print Form >>

**Make Payment**

**No fee due, make sure fee is not needed.** [No Payment due, Continue >>](#) 

Items Ordered

No items in order.

Payment Method\*

Choose One

Registration for your coaches is now done. They can print out their ELA's and the Concussion Sideline Management document if they wish.

**Thank you for Registering!**

[Traducir en Español](#)

1. Add Family Member >> 2. Create Registration >> 3. Accept ELA >> 4. Make Payment >> 5. Print Form >>

**Print Form**

**Congratulations, registration is now complete!**

Use the buttons below to save and print documents for your records.

[Print Receipts & Forms](#) [Print ELA](#)

[Concussion Sideline Management.pdf](#)

[Log out and back to \[My Account Login\] page](#)