



South Central Premier

Registration Guide

The information in this document will help provide instructions for setting up a family account, registering for a program (example: registering a player to a specific age team), and setting up the payment options. As new features are added or updated we will update this guide.

You will need a digital copy of your child's birth certificate, a head shot photo of the player, and health insurance information.

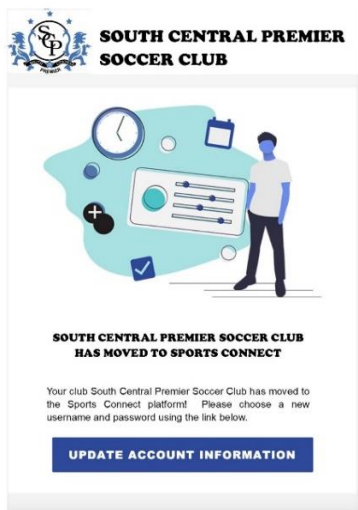
Any questions regarding the registration process please contact Kyle Habiniak at habiniak.pe@gmail.com or 203-623-2438 (text or voice).

Any questions regarding payments please contact Nikki Kelly at nthomaskelly@sbcglobal.net or 203-600-8108 (cell)

CREATING AN ACCOUNT WITH SOUTH CENTRAL PREMIER (SCP) (one time action)

2019-2020 Active SCP Families:

You will receive an email from **Sports Connect** with the image below. Each registered family member with an e-mail address will receive the notification. Click the link in the email to begin creating an account and follow the steps below:



New Families to SCP: Two Options

Option 1:

Copy & paste or simply select the link to go to the new Sports Connect website registration [South Central Premier New Member Registration](#)

Option 2:

Visit <http://www.southcentralpremier.com/> and select register (top right corner of the page)

Welcome to the South Central Premier's new website and registration system. Please click the login button on the top right to create a new account or login.

SOUTH CENTRAL PREMIER

CLUB | PROGRAMS | TEAMS | SUMMER CLINICS | STAFF | SCP STRONG | KOC TOURNAMENT | TRYOUTS | LINKS

HELPFUL LINKS

- Summer Clinics
- Available Programs

SITE UNDER CONSTRUCTION

NEWS
Mar 17, 2020
GOALKEEPER TRAINING SERIES...
Thank you Coach Dan!
Sep 01, 2019
SCP ELM CITY WOLVES SPONS...
SCP is proud to sponsor the SCP Elm City Wolves in the South Central District Travel Team League.

FIELD STATUS
CT SPORTSPLEX
Updated: 07/09/20 9:39AM
Outdoor Field #1 (11v11) OPEN
Outdoor Field #2 (9v9) OPEN
Field House (Rear Field) CLOSED
Dome Field #1 CLOSED
Dome Field #2 CLOSED
Dome Field #3 CLOSED
Dome Field #4 CLOSED

FACEBOOK
South Central Premier Socce...
Like Page 543 likes
Be the first of your friends to like this
UDL ESPN
UPCOMING GAMES ON ESPN
All other games listed on ESPN

CREATING USER NAME AND PASSWORD FOR SPORTS CONNECT (one time action)

New or existing SCP family: click the [Register Now!](#) link under login. Screen shot below of the page.

The screenshot shows the login page for the South Central Premier Soccer Club. At the top, there is a blue banner with the text "SOUTH CENTRAL PREMIER SOCCER CLUB". Below this is a white login form with the "sports connect" logo. The form includes a "Username" field, a "Password" field with an eye icon, and a blue "Login" button. Below the login button, there is a red circle around the text "Don't have an account? Register Now!" and "Forgot your Username or Password?". At the bottom of the page, there is a footer with copyright information and the "sports connect" logo.

Upon selecting “Register Now” you are prompted to enter e-mail and create a user name and password.

- Username can be your email or a word.
- Password must contain at least
 - (1) lower case letter
 - (1) upper case letter
 - (1) number
 - (1) special charagter
 - fulfill the lenth of password requirement

SOUTH CENTRAL PREMIER SOCCER CLUB



Please create your new family account with South Central Premier Soccer Club. You will need a digital copy of the players birth certificate to upload, and your health insurance information.

Email Address

Create Username

Password

Confirm Password

Create Account

Already have an account? Login here!

By clicking Create Account you agree to the Sports Connect Terms of Service, Privacy Policy, License Agreement and Children's Privacy Policy.

Copyright © 2020 South Central Premier Soccer Club | Privacy Statement | Terms Of Use | License Agreement | Children's Privacy Policy

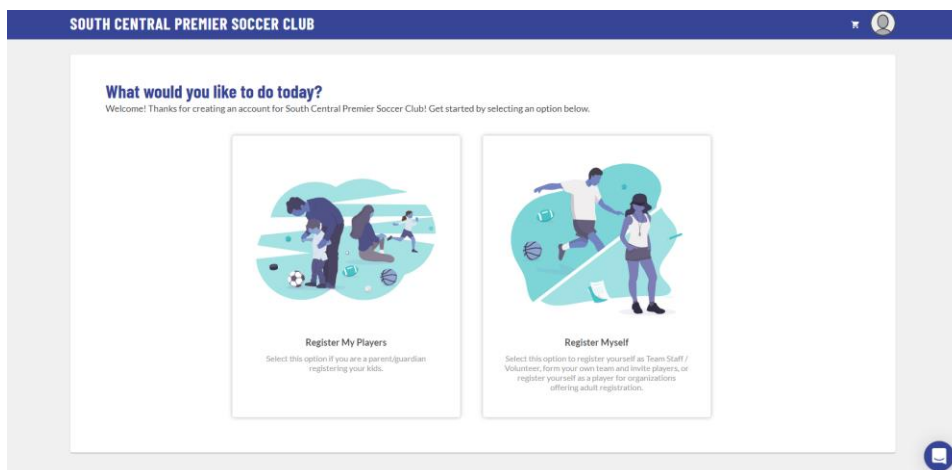


REGISTERING PARENTS / GUARDIANS AND PLAYERS

Once the account is created you are ready to register all parents/guardians and players.

2019-2020 Active SCP Families- some information from the prior system is being transferred and is expected to be pre-populated. Please take the time to review and update any information.

Step 1- When you click the [Register Now!](#) link this screen will appear. Click the **Register My Players** box.



Step 2 - Account Holder (Parental) Information

After choosing the **Register My Players** the system will need to gather information on the account holder (parent or guardian). You can also add an additional account holder at this time.

The screenshot shows a registration form titled "Okay, let's get to know you first." with a sub-header "Account Holder Information". The form includes fields for Username (Junk4Habitak), Gender (Male), First Name, Last Name, Relationship to Player (Father), Email Address, Cell Phone, Telephone, and Address Information (Street, Unit, City, State, ZIP). A checkbox for receiving text alerts is set to "No". Below this is an "Additional Account Holder Information" section with fields for First Name, Last Name, Gender, and Relationship to Player, and an "Additional Contact Email" field. Navigation buttons for "Back" and "Continue" are at the bottom.

Click the **Continue** button in the bottom right corner when you have completed all the necessary information.

Step 3 – Choose the number of players you are registering.

The screenshot shows a screen titled "Nice to meet you Kyle, how many kids are you registering today?" with a sub-header "Feel free to include all your kids here. Many sports organizations have programs for all ages." Below the text are six circular buttons labeled 1, 2, 3, 4, 5, and a plus sign (+). A "Back" button is located at the bottom left.

Once you select a number the **Continue** button will appear.

Step 4 – Player 1 Information

Complete the information on the form, upload a digital copy of the player birth certificate, upload a head shot and crop.

The screenshot shows a registration form titled "PLAYER 1 info" with a sub-header "Got it, now let's get". Below the title is a note: "It's important that you enter the legal first name & last name, as well as correct birthday so we can make sure to get Alessandra registered in the right program." The form is divided into three sections: "Player Information", "Address Information", and "Additional Information".

- Player Information:** Includes a circular profile picture placeholder, "Legal First Name*" (Required), "Legal Last Name*" (Required), "Gender*" (dropdown), "Date of Birth*" (calendar icon), and "Birth Certificate*" with a "Choose File" button.
- Address Information:** Includes a checkbox for "Same as primary account: Yes", "Street*" (Required), "City*", "State*" (dropdown), and "ZIP*" (Required).
- Additional Information:** Includes "Emergency Contact First Name*", "Emergency Contact Last Name*", and "Emergency Contact Telephone*" (Required).

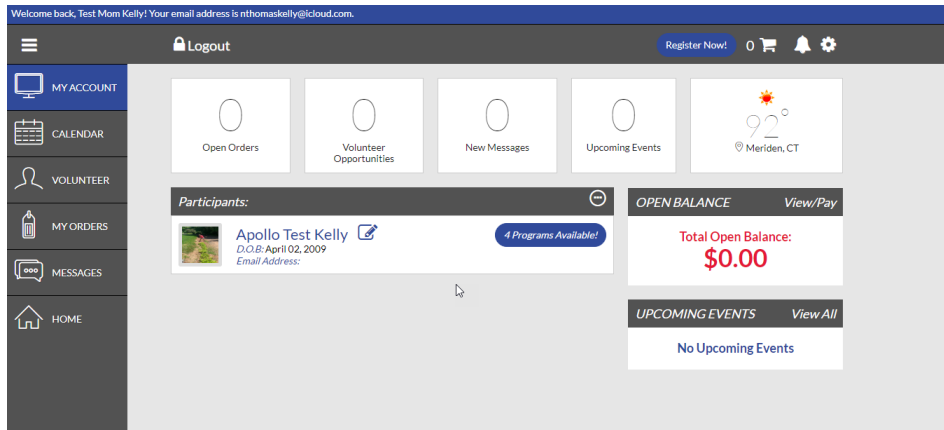
Navigation buttons include "< Back" and "Continue >".

Click **Continue** in bottom right corner once you have completed the necessary information. If you have chosen multiple kids to register the next screen will be Player 2. Complete the form for player 2 then click Continue. The form will regenerate for as many kids as you have chosen in Step 3.

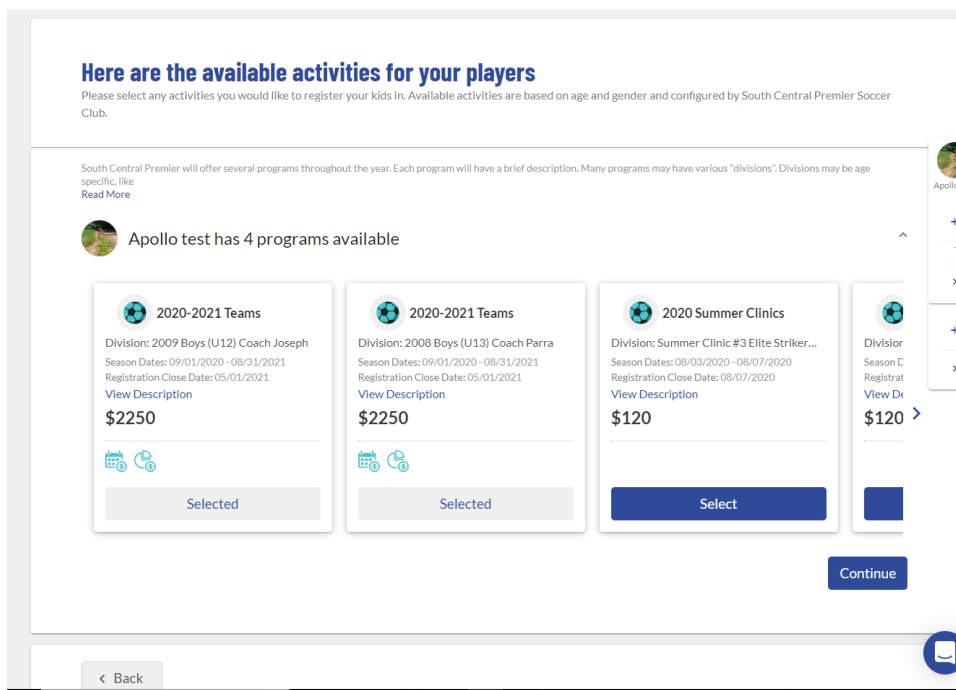
REGISTERING FOR AVAILABLE PROGRAMS

Once parent/guardian and player accounts are established it is now time to register for a program, such as the 2020-2021 teams. The family home page provides a summary of the account along with available programs for each player.

Choose an available program to register your player. Be sure you are registering for the correct age appropriate team and the correct coach is listed. Sample image below you should have two programs available. **Register for the age appropriate team unless you have been asked by the coach to register for the next age group team. **



Step 1: selecting the program (teams)



Once you select the programs (teams) registering for hit **continue**.

Step 2: Program Form

Complete the information required for the program on the form. Then click **Continue** in bottom right corner.

This is the program question preview.
The questions will display for each player registering in this program.

Player Name

Legal First Name * MI Legal Last Name *

Gender * Date of Birth *

Birth Certificate *

2020-2021 Teams

COVID-19 Waiver (20440) * Medical Release (27726) *

In consideration of being allowed to participate in any way in any program, event, or activity sponsored or authorized by Connecticut Junior Soccer Association, Inc. and/or any affiliated member, I, the undersigned, acknowledge, appreciate, and agree that: I am aware there are risks to me of exposure to, directly or indirectly, arising out of, contributed to, by, or resulting from an outbreak of any and all communicable disease, including but not limited to the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE CONNECTICUT JUNIOR SOCCER ASSOCIATION, INC. AND ITS AFFILIATED MEMBERS, and their respective officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct any program, event, or activity (RELEASES), from any and all claims, demands, losses, and liability arising out of or related to any ILLNESS, INJURY, DISABILITY OR DEATH I may suffer, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PARENT'S APPROVAL AND MEDICAL RELEASE: Recognizing the possibility of physical injury associated with soccer and in consideration for the USNS USYS/A and its affiliates accepting the registrant for its soccer programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify the USNS USYS/A, its affiliated organizations and sponsors, their employees and associated personnel, including the owner of fields and facilities utilized for the Programs against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize. My son/daughter has received a physical examination by a physician and has been found physically capable of participating in the Programs. I hereby 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 accept the Electronic Legal Agreement

First Name * Last Name *

Is the participant new or returning? *

New Returning

School Name *

Enter Answer 0/40

Emergency Contact *

Enter Answer 0/40

Emergency Contact Work Phone *

Enter Answer 0/40

Other Medical Conditions *

Enter Answer 0/40

Physician Phone *

Enter Answer 0/40

Insurance Company Phone *

Enter Answer 0/40

Policy # *

Enter Answer 0/40

I accept the Electronic Legal Agreement

First Name * Last Name *

Current Grade *

Select One

Player Code of Conduct *

PLAYERS CODE OF CONDUCT

- I understand it is a privilege to play at South Central Premier that my parents/guardians have afforded me.
- I will play soccer because I want to, not because others want me to.
- I will respect the game of soccer, learn its laws, and abide by them.
- I will show respect at all times for all coaches, referees, players, spectators, and club officials.
- I will control my temper. I will not fight or use foul or abusive language or

I Accept

Emergency Contact Home Phone *

Enter Answer 0/40

Allergies *

Enter Answer 0/40

Player's Physician *

Enter Answer 0/40

Medical and/or Insurance Company *

Enter Answer 0/40

Policy Holder *

Enter Answer 0/40

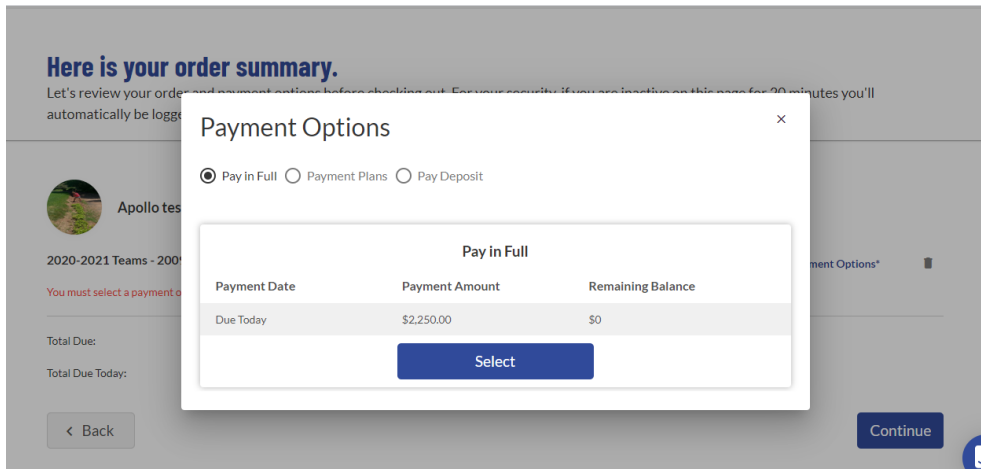
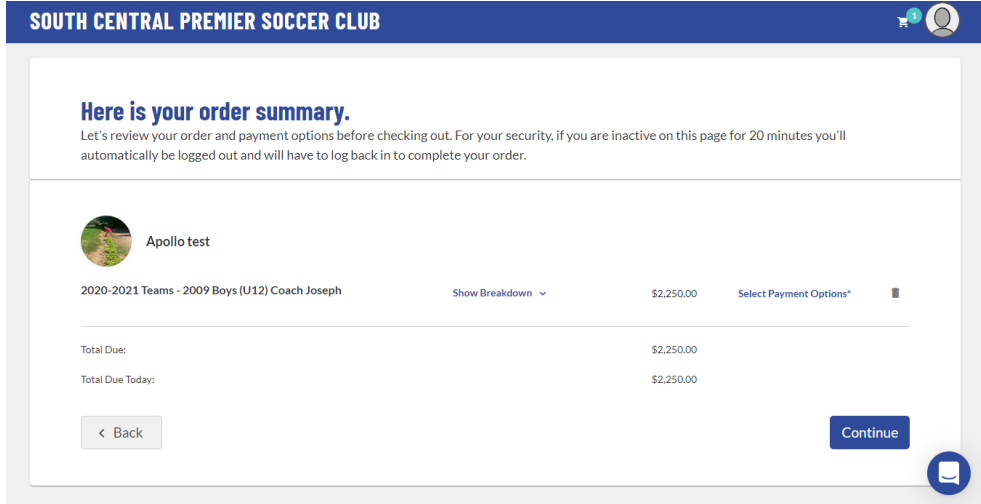
Group # *

Enter Answer 0/40

Step 3: – Order Summary

Verify you order summary. When a program offers several payment options, select the option prior to clicking **Continue**.

Note: traditionally SCP offers families with 2 or more players participating in the premier team program a 10% discount. Upon answering the “multiple player question” when registering the discount will be applied and reflected in the summary.



Step 4: - Check Out

Complete the necessary information and click the box to agree to the terms and conditions. Then click **Submit Order**

If you've received a "coupon" code from SCP's treasurer, Nikki Kelly, this is the point to enter the code to receive the respective credit.



It's time to check out

For your security, if you are inactive on this page for 20 minutes you'll automatically be logged out and will have to log back in to complete your order.

COUPON CODE

If you have a coupon code, enter it here:

Coupon Code

Apply

INSURANCE

Add SecureFee™ Registration Cancellation Insurance and you may be reimbursed for the cost of your non-refundable, unused registration fees, less any refunds, up to \$5,000, if you cannot participate in the event for which you registered for any of the covered reasons stated in the policy.

No thank you, I do not wish to purchase SecureFee™.

PAYMENT METHOD

Payment Method*

Credit Card

Cards Accepted:



Credit Card*

Month*

Year*

Security Code*

[What's this?](#)

BILLING ADDRESS

Is the billing address the same as the primary account holder's address? Yes

First Name
Test Mom

Last Name
Kelly

Order Summary

Registration	
Programs	\$2,250.00
Service Fee	\$2.80
Subtotal:	\$2,252.80
Total:	\$2,252.80
Due Today:	\$2,252.80

Order Summary

Registration	
Programs	\$2,250.00
Service Fee	\$2.80
Subtotal:	\$2,252.80
Total:	\$2,252.80
Due Today:	\$2,252.80

The next screen will be a Congratulation! Your order has been submitted.

Congratulations! Your order has been submitted!

Thanks, Kyle,

Your order has been successfully placed. Your Registration Order Confirmation Number is

Open Balance

Total Open Balance: \$0.00

Payment Method \$122.80 Your credit card ending in will be charged \$122.80. You will see a charge on your credit card statement from South Central Premier Soccer Club.

2020 Summer Clinics

Thank you for selecting the South Central Premier Summer Clinic program. We will send you a reminder e-mail prior to your session starting. During the week or weeks of your sessions we will also post any last minute changes to our website www.southcentralpremier.com.

Enjoy the session.

Please contact Coach Carlos Pirra at 203-606-6100 or parrasoccer@gmail.com with questions regarding the training sessions. Please contact South Central Premier Treasurer Nikki Kelly at nthomaskelly@scpcglobal.net with questions regarding fees and payments.

[My Account](#)