

Sparta United District 3

UTAH YOUTH SOCCER ASSOCIATION



User Login:

Forgot Password

Back To UYSA

Tech Support Contact



Registration

Tournament

Gaming

Welcome to Sparta United Online Registration for the 2011 - 2012 Season

To get started with the registration process, click on the "Registration" tab above.

Registration fees are for both Fall and Spring play and include:

State & District Fees

Payments can be made with Mastercard, Visa, American Express, and Discover

Registration begins June 1, 2011

ASSOCIATION HOT SHEET

You must have a team assignment code from your team manager in order to continue online registration.

Please enter the assignment code exactly how it appears with capital letters and dashes.



User Login:

Username:

Password:

[Forgot Password](#)

[Back To HYSA](#)

Registration

Welcome to Sparta United Online Registration for the
2011 - 2012 Season

ASS
.....
You r
assign
YOUR



My Info

Spencer R Bills

[Redacted]

W: (801) 824-5675
H: (801) 766-3543
C: (801) 824-5675
[Edit](#)

Family Members

Spencer R Bills	Father	Edit
Teia Bills	Mother	Edit
Garrett S Bills	Player	Edit
Jacob R Bills	Player	Edit
Abbigale Bills	Player	Edit

[Add More Family Members](#)

[Create Registration](#)



IMPORTANT: If you have a child that has played competition soccer in the past then you already have an account and do not need to create a new one. If you have forgotten your username/password then click on the "Forgot Username / Password" link.

If this is your first child to play competition soccer you will need to select "Create New Account" and it will walk you through the process of setting up your account.

Select registration type(s)

Season: Fall/Spring 2011-2012

Select registration type(s): * ?

Player Registration

Coach / Admin Registration

Continue >>

* are required fields



Account Primary Contact

Name: Spencer R Bills
Address: [REDACTED]
Phone: (801) 766-3543(h) (801) 824-5675(w) (801) 824-5675 (c)
Email: spencer@spartaunited.org

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

Add All Your Family Members To Be Registered

Name	IDNum	DOB	Gender	Relationship
Spencer R Bills	20004-117234	07/30/1972	M	Father
Teia Bills	60005-199167	10/08/1975	F	Mother
Garrett S Bills	69705-199168	04/11/1997	M	Player
Abbigale Bills	19043-981133	04/19/2003	F	Player
Jacob R Bills	12305-602358	09/10/1999	M	Player



Add New Player

Add New Parent/Guardian

Continue >>



4 Steps To Go

1: Add Family Member >>

2: Create Registration >>

3: Accept ELA >>

4. Make Payment >>

Print Form



Register Only Members Who Play This Season (Fall/Spring 2011-2012)

Name	ID Num	DOB	Relationship	Registration
Spencer R Bills	20004-117234	07/30/1972	Father	--
Teia Bills	60005-199167	10/08/1975	Mother	--
Abbigale Bills	19043-981133	04/19/2003	Player	Register as Player
Garrett S Bills	69705-199168	04/11/1997	Player	Register as Player
Jacob R Bills	12305-602358	09/10/1999	Player	Register as Player

Missing the family member to be registered?

<< Back



Register Abbigale Bills as Player



Abbigale Bills

Team Assignment Code

? What is team assignment code?

Enter Assignment Code*

Enter

Cancel

*Required

**Just One Required

12)

B

0/197

8/197

9/200

1/199

0/199

ssign



4 Steps To Go

1: Add Family Member >>

2: Create Registration >>

3: Accept ELA >>

4. Make Payment >>

5. Print Form



Register Only Members Who Play This Season (Fall/Spring 2011-2012)

Name	ID Num	DOB	Relationship	Registration
Spencer R Bills	20004-117234	07/30/1972	Father	--
Teia Bills	60005-199167	10/08/1975	Mother	--
Abbigale Bills	19043-981133	04/19/2003	Player	Registering Now
Garrett S Bills	69705-199168	04/11/1997	Player	<input type="button" value="Register as Player"/>
Jacob R Bills	12305-602358	09/10/1999	Player	<input type="button" value="Register as Player"/>

Missing the family member to be registered?



List Of Registrations Just Created

Name	IDNum	DOB	PlayLevel	AgeGroup	AssignmentCode	RegType	Remove
Abbigale Bills	19043-981133	04/19/2003	X_League	Under 9	8151-25696-PL01	PL	<input type="button" value="Remove"/>



Please read and accept the following Electronic Legal Agreements to continue with your registration.

3 Steps To Go

1: Add Family Member >>

2: Create Registration >>

3: Accept ELA >>

4: Make Payment >>

5: Print Form



Accept ELA

1 of 6 PARTICIPATION RISK STATEMENT

I, the undersigned am a parent or legal guardian of the named minor. I fully understand that participating in the sport of soccer presents a risk for serious injury and death. In my capacity as parent or legal guardian, I understand the risks and my responsibility to notify the other parent or legal guardians as well as the minor of the risks involved with sport participation. I have made a conscious decision to allow the named minor to play. I agree that my health and accident insurance will be the primary insurance to cover expenses for any such injury, including rehabilitation.

I Accept

2 of 6 CONSENT FOR MEDICAL TREATMENT

As parent or legal guardian of the above-named registrant, I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are deemed necessary to preserve the life, limb, or well-being of the registrant.

I Accept

3 of 6 State and District refund policy

The State and District Registration fee is not refundable or transferable.

I Accept

4 of 6 Team registration

Note: Your registration to this team/club is final once online registration is completed.

I Accept

5 of 6 PARENT CODE OF CONDUCT

This Parent Code of Conduct has been developed to clarify and define the standards of professional, ethical, and moral behavior from parents affiliated with the Utah Youth Soccer Association (UYSA). 1. I will emphasize that the game is played for fun, and for the benefit of the youth, not adults. 2. I will act as a role model by demonstrating positive support for all players, coaches, and game officials regardless of race, creed, color, gender, religion, or ability. 3. I will not engage in any kind of unsportsmanlike conduct with any official, coach, player, parent, or spectator such as booing and taunting, refusing to shake hands, or using profane language or gestures. 4. I will teach my child to play within the spirit and intentions of the rules and the Laws of the Game. 5. I will refrain from criticizing the game officials, and will respect their authority and decisions during games. 6. I will never place the value of winning over the safety and welfare of the players. 7. I will demand a sports environment free from drugs, tobacco, and alcohol and I will refrain from their use at all sporting events. 8. I will not encourage, invite, nor recruit any player from an opposing team to join my child's team during the playing season. I understand that if I fail to abide by the aforementioned UYSA Parent Code of Conduct, I will be subject to disciplinary action that could include, but is not limited to the following: Verbal warning by an official, team coach, and/or head of league organization Game forfeiture through an official or team coach Parental suspension with written documentation to be kept on file with UYSA I have read this UYSA Parent Code of Conduct. I understand its requirements and agree to abide by the letter and spirit of this UYSA Parent Code of Conduct.

I Accept

6 of 6 CONCUSSION POLICY

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly. In other words, even a "ding" or a bump on the head can be serious. You can't see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away. Symptoms may include one or more of the following: Headaches • Pressure in head • Nausea or vomiting • Neck pain • Balance problems or dizziness • Blurred, double, or fuzzy vision • Sensitivity to light or noise • Feeling sluggish or slowed down • Feeling foggy or groggy • Drowsiness • Change in sleep patterns • Amnesia • "Don't feel right" • Fatigue or low energy • Sadness • Nervousness or anxiety • Irritability • More emotional • Confusion • Concentration or memory problems (forgetting game plays) • Repeating the same question/comment Signs observed by teammates, parents and coaches include: • Appears dazed • Vacant facial expression • Confused about assignment •

I Accept



If you would like to receive the UYSA/RSL promo ticket, please place a check next to the ticket so it will be added to your order.

All tickets purchased during registration can be redeemed for use on one of the following game dates:

Saturday June 25th 7pm vs Toronto FC / Saturday July 30th 7pm vs Columbus Crew / Saturday July 9th 7pm vs FC Dallas / Saturday Sept 17th 7pm vs Sporting KC

Redeem the promo ticket and purchase additional seats beginning at \$18 (\$7 off the regular price) via our exclusive online link: www.realsaltlake.com/uysa-promo-offer

QUESTIONS? PLEASE CONTACT THE RSL COMMUNITY DEPARTMENT:

SCOTT REYNOLDS 801-727-2862 sreynolds@realsaltlake.com

MATT RADER 801-727-2864 mrader@realsaltlake.com

MITCH DIAZ 801-727-2853 mdiaz@realsaltlake.com

Thank You!!

2 Steps To Go

1: Add Family Member >>

2: Create Registration >>

3: Accept ELA >>

4. Make Payment >>

5. Print Form



Make Payment

	Product	Promo Code	Qty	Price
<input checked="" type="checkbox"/>	Abbigale Bills, CO-OP Fee, Under 9 ,X_League		1	26.45
<input type="checkbox"/>	Abbigale Bills, Real Salt Lake Promo Ticket, Under 9 ,X-League		1	6.00
<input checked="" type="checkbox"/>	Abbigale Bills, State Fee, Under 9 ,X-League		1	53.00
<input checked="" type="checkbox"/>	Abbigale Bills, District Fee, Under 9 ,X_League		1	2.55

Choose One

American Express	4 item(s) totaling: 82.00
Discover	Order Total: 82.00
Mastercard	Total Due: 82.00
Visa	

Visa

continue >>



Online Registration is complete

