## **Delhi Athletic Association**

Online Signup Guide

The quick reference guide below provides D.A.A. members with instructions on how to use the **newer** version of online sign-up in order to register a child who will be playing for D.A.A. in one or more of our sports.

**Login/Register:** In the upper right corner click on register, complete new customer primary contact section then, click **"create new account."** 

LOGIN/REGISTER	
Returning Customer	New Customer Primary Contact
• User Name:  • Password:  • Description: • Password: • Password: • Sign In • Stay Signed In • Forgot Username or Password?	<ul> <li>First Name:</li> <li>Middle Initiat:</li> <li>Last Name:</li> <li>Suffix:</li> <li>Email Address:</li> <li>User Name:</li> <li>Only letters, numbers, @ dot (.) and underscore (_) are allowed</li> <li>Password:</li> <li>Reenter Password:</li> <li>Create New Account</li> </ul>
Need Help? Registration Help powered by VeriSign	

**Login/Register Cont:** The registration page will appear please, be sure to complete all necessary information including secondary parent/guardian if applicable then, and click "next."

Primary Conta	ct Information	Secondary Parent / Guardian Information
* Street:	123 Test St	First Name:
Unit#:		Last Name:
* City:	Cincinnati	Telephone:
* State:	Ohio	Cell Phone:
* Zip Code:	45238	Secondary Contact Email:
* Country:	United States	
* Telephone:	513 555 5555	
Cell Phone:		
VERVY. I Votoria	Cancel leed Help? Registration Help	Next
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powered by Verisign Toour sist centericates	Cancel Red Help? Registration Help	Next

Add a New Participant: Complete of required information in this section then, click "next." If you have additional children to add click on "add another participant."

All fields marked with an asterisk (*) are required	1
Same as Primary Contact:	
Participant's First Name:	Tom
Participant's Middle Initial:	
*Participant's Last Name:	Jones
*Participant's Date of Pirth:	Male
Participant's Email:	Mar 💌 5 💌 2002 💌
*Street:	122 Tect St
Unit#:	123 1531 31
*City:	Cincipnati
* State:	Ohio
*Zip Code:	45238
*Country:	United States
*Telephone:	513 555 5555
Cellphone:	
Ca	Incel Add Another Participant Next
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**Available Programs:** Click on the box next to the sport your child is signing up to play then, click "next" cost and bracket your child will play in will be on this screen.

НОМ	E SPORTS SPECIAL EVE	INTS HALL OF FAME BY-LAWS FORMS	SPIRIT WEAR CO	NTACT SPONS	ORS
AV	AILABLE PROGRAMS				
Av	ailable Programs				
Nan	Program Name	Ignup today:) Details	Start Date	End Date	Price
	2013 Fall Soccer	16 Boys Strikers II - DOB 8/1/01 - 7/31/02	08/01/2013	11/16/2013	\$55.00
	2013 Football Season	6th Grade - May not turn 13 by 9/30	07/01/2013	11/16/2013	\$75.00
		<< Back Next >>			
	Need Help? Norton SECURED wered by VeriSian	telp			
	ABOUT SSL CERTIFICATES				
Sit	e Links		Contact Us		
	in / Register		Delhi Athletic Associat	tion Email: daaspor	is@gmail.com
			Delhi Athletic Associat		

**Shopping Cart:** Verify the sport you are signing up for is correct then, click "next."

HOME	SPORTS SF	PECIAL EVENTS HALL OF FAME	BY-LAWS F	ORMS SPIRI		ACT SPON	ISORS
SHOPF	PING CART						
Shop	ping Cart D	etails					
Program	ı	Details		First Name	Last Name	Price	Remove
2013 Fall	Soccer	16 Boys Strikers II - DOB 8/1/01 - 7/31/0	2	Tom	Jones	\$55.00	
						S	UBTOTAL: \$55.00
		<< Back	Update Cart	t Next	>>>		
	VERIFY+	Need Help?					
powered ABOUT 55	Norton SECURED d by VeriSign sL CERTIFICATES	Registration Help					
powered AGOIT 55	Norton SECURED d by VeriSign sL CERTIFICATES	Registration Help		Co	ntact Us		
Site Link Login / Re Home Sports	Norton SECURED d by Verisign RCERTIFICATES ks	Registration Help	ATRIATIC BOOST	Det Det Con Cin	ntact Us hi Athletic Association i. Box 389249 cinnati, Ohio 45238	Email: daasp	orts@gmail.com

Additional information: Complete this section if you have additional information you to add about your family then, read D.A.A. liability waiver and check yes to continue; complete the emergency contact information and click next.

Mothers Name First / Last		
Moms Home Phone		
Mothers Cell Phone		
Mothers Email Address		
Fathers Name - First / Last		
Fathers Phone		
Fathers Cell		
Fathers Email		
Legal Guardian if Not Parents		
Legal Guardian Phone		
Players School		
<ul> <li>Delhi Athletic Association Waiver</li> <li>I accept the waiver:</li> <li>Emergency Contact First Name</li> <li>Emergency Contact Last Name</li> <li>Emergency Contact Phone Number</li> </ul>	In consideration of my child or ward participating in a sports program sponsored by Delhi Hills Athletic Association, inc. (the Association) I / We acknowledge that we will be considered as members of the Association and as members of the Association, I/We do hereby release and forever discharge any and all volunteers, coaches, sponsors or organizers of the Association from any and all claims, demands, damages, actions or causes whether on account of damage to bodily injuries, including death, or property resulting or to result from any accident arising from my child's participation in the sporting activities sponsored by the Association. I/We further agree to indemnify, to forever hold harmless and to defend and assume the costs of defense of any and all volunteers, coaches, sponsors or organizers of the Association I/We acknowledge and agree that the Association does not provide any medical or hospital insurance coverage for any injuries that may be sustained by my child and I/We shall be resonnsible for any and	E
	<< Back Next >>	
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**Volunteer Section:** If you want to volunteer to be a coach, assistant coach or team administrator complete this section, if you do not want to volunteer click on "next."

HOME SPORTS SPECIAL EVENT	S HALL OF FAME BY-LAWS FORMS	SPIRIT WEAR CONTACT SPON	SORS
VOLUNTEER SELECTION			
Volunteer			
Program	Details	Volunteer Role	Select
2013 Fall Soccer	16 Boys Strikers II - DOB 8/1/01 - 7/31/02	Assistant Coach	
2013 Fall Soccer	16 Boys Strikers II - DOB 8/1/01 - 7/31/02	Head Coach	
Need Help? Need Help? Registration Help powered by VeriSign ABOUT SSL CERTIFICATES			
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**Check Out:** Enter the credit card number, expiration date and security code on the back of your card then, click "submit order."

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Payment Amount :	\$55	
Processing Fee :	\$1.54	
Total Payment :	56.54	
Open Balance :	\$0.00	
Credit Card Number:		
<ul> <li>Expiration Month/Yea</li> </ul>		
Card Security Code :	0	
	Need Help? Credt Card Purchases Registration Help <sup>You</sup> will see a charge on your credit card statement from Blue Sombrero.	
Registration Terms		
Note: Please read the Terms	and Conditions carefully before you proceed with placing the Order	
TERMS AND CONDITIONS F As consideration for the serv due immediately and are nor	OR REGISTRATION ORDERS: ices you purchased, you agree to pay Blue Sombrero the applicable fees set forth on our Web site at the time of your order. All fees are in-refundable, except as otherwise expressly noted on the Blue Sombrero website. You certify and agree that you are responsible for the	
you have all requisite power	rovide to Blue Sombrero and that you are an authorized user for the chosen credit card account. In addition, you agree and warrant that: (i) and authority to execute this Agreement and to perform your obligations hereunder, (ii) you are of legal age to enter into this Agreement.	
* 🔲 I agree to the abo	ve terms and conditions	
	<< Back Submit Order	1
	<< Back Submit Order	
· I agree to the abo	ve terms and conditions	

Once you submit an order you will receive an e-mail which includes receipt of payment, information pertaining to your child's sport and/or any other applicable information. The sport coordinator also, receives an e-mail to notify him or her of a sign-up.