

This guides intent is to provide step by step instructions for completing online registration for ODP.

To begin please proceed to the following URL: <http://ma-odpwinter.affinitysoccer.com>

- Begin by first reading all instructions on the landing page.



Registration

Welcome and Thank You for registering with Mass Youth Soccer for ODP Winter session!
To begin your registration please read all instructions listed below or [CLICK HERE](#) for a downloading PDF of instructions.

TRYOUT DATES/TIMES

Saturday, October 29th	Fields 1-6	Sunday, October 30th	Fields 1-6
2005 Boys and Girls	8:00am-9:30am	2001, 2000 Girls	8:00am-9:30am
2004 Girls	9:40am-11:10am	2001, 2000 Boys	9:40am-11:10am
2004 Boys	11:20am-12:50pm	2002 Girls	11:20am-12:50pm
2003 Boys	1:20pm-2:50pm	2002 Boys	1:20pm-2:50pm
2003 Girls	3:00pm-4:30pm		

Saturday, November 10	Fields 1-6	Sunday, November 11	Fields 1-6
2005, 2000 Girls	8:00am-9:30am	2001 Boys and Girls	8:00am-9:30am
2004, 2001 Boys	9:40am-11:10am	2004 Girls	9:40am-11:10am
2002 Girls	11:20am-12:50pm	2004 Boys	11:20am-12:50pm
2003 Boys	1:20pm-2:50pm	2003 Boys	1:20pm-2:50pm
		2003 Girls	3:00pm-4:30pm

PLEASE CLICK THE REGISTER NOW! BUTTON TO BEGIN

Register Now!

- Click the **Register Now** button.

Login/create account

- Select registration type “Winter ODP Player Tryout Registration”.
- A select number of users may already have an account. If you have an account please log in with your exiting username and password.
- If you do not have an account please select “**Create an Account**”

[<< Back to Main Page](#)

[Traducir en Español](#)

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

Select registration type(s) ?	Returning users, please login. ?
<p>Select a season: *</p> <p>ODP 2017-2018 ▼</p>	<p><i>Remember to select a season & registration type before logging in!</i></p>
<p>Select registration type(s): *</p> <p><input checked="" type="checkbox"/> ODP Player Tryout Registration</p>	<p>Enter Username*</p> <input type="text" value="Username"/>
<p>* are required fields</p>	<p>Enter Password*</p> <input type="password" value="••••••••"/>
	<p>Forgot Username or Password?</p> <p><input type="button" value="Login"/></p> <p>Don't have an Account?</p> <p><input type="button" value="Create New Account"/></p>

Registration Steps

- If creating an account for the first time enter Parent/Guardian information. If you signed in with existing account you will be taken directly to Step 1.
- After entering in your information select the green **Save & Continue** button.

STEP 1 – Add Family Member

- Click on the blue **Add New Player** button

Account Primary Contact

Name: John Doe
Address: 1234 My Address City, MA 01523
Phone: (887) 123-4567(h)
Email: none@none.com

Please add all your missing family members who need to be registered now or later. All added family, 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
John Doe	29489-640101		M	Father

- Enter the players **First Name, Gender, and Birthdate**. Please be sure you have the correct birthdate entered before adding the player. Once you add them the Birthdate cannot be changed.

Register Only Members Who Participate This Season (ODP 2016-2017)

Name	ID Num	DOB	Relationship	Registration
ODP Parent Demo	36070-072750		Father	--
ODP Player Demo	46310-402772	03/02/2001	Player	Register

- Enter all information in the application process. You will be required to upload a photo of the player you are registering.

ODP Player Demo

Select Play Level

Play Level* Winter Tryout-ODP

Age Group* 2001

Personal Information

First Name* ODP Player Initial Last Name* Demo Suffix

Gender* Male Birthdate* March 02 2001

Click here to show photo or certification upload* Required: 'Photo'



- To upload the photo, click on the **“Click here to show photo or birth certificate upload”** This will expand and show an icon that you will click to browse your device and select a photo.



Upload Profile Photo
Name: Jack Doe
DOB: (01/11/2002)

Use editing tools to adjust image, then click "Upload Image" to upload

Select image area to crop: Resize image to: 50% Rotate (clockwise):

Selected Image:



- After entering all information select the **Save** button at the bottom of the page.
- You will be taken back to step 2. *You will now have the player you just registered appearing at the bottom in the "List of Registrations Just Created" and they will have "Adding as Player Now" appearing in place of the add to team as player button.* At this point the registration has been completed. Click the green **Continue** button to proceed to next page.

Step 3 – Accept ELA

- Accept the Electronic Legal Agreement (ELA) by placing a check mark in the “**I Accept**” and “**I accept on behalf of all listed members below**” check boxes. Click the green **Agree & Continue** button.

Accept ELA

1 of 1 Massachusetts Youth Soccer ODP Player Agreement

I, the registrant, hereby agree and acknowledge the following: (1) 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/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. (2) 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

I Accept

I accept on behalf of all listed members below:

Name:
Jack Doe

Your First Name* Your Last Name*
John Doe

<< Back Print Agree & Continue >>

Step 4 – Make Payment

- *Choose your method of payment*, and select the **Continue** button. Enter the detailed payment information and submit payment.

Traducir en Español

Add Family Member >> Create Registration >> Accept ELA >> Make Payment >> Print Form

Make Payment

Registration Fee

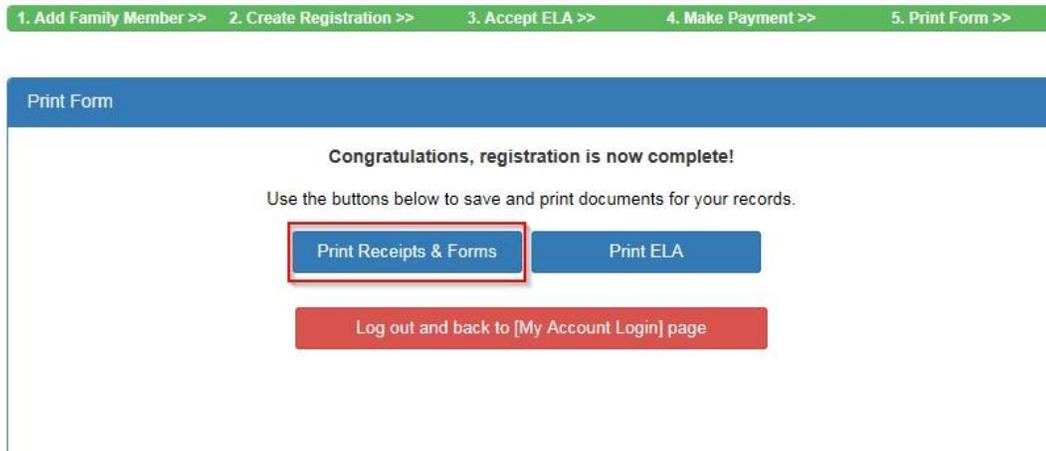
Product	Promo Code	Qty	Price*Qty
✓ Ginger Test, Registration Fee, 2002 ,ODP Tryout		1	35.00

1 item(s) totaling: 35.00
Order Total: 35.00
Total Due: 35.00

Payment Method*
Choose One
Continue >>

Step 5 – Print Form

- Select **“Print Receipts & Forms”** to print receipts for your records.



You have successfully completed your online registration for ODP.