

## *Online Registration with USA Hockey*

(Before you start) – Please know that USAHOCKEY.COM is VeriSign Secured and your Credit Card information is SAFE!



English

23/6/2008 9:50

www.usahockeyregistration.com uses VeriSign services as follows:

<b>SITE NAME:</b>	www.usahockeyregistration.com
<b>SSL CERTIFICATE STATUS:</b>	Valid (20-Jun-2006 to 16-Aug-2009)
<b>COMPANY/ ORGANIZATION:</b>	USA HOCKEY Colorado Springs Colorado, US
 <b>Encrypted Data Transmission</b>	This Web site can secure your private information using a VeriSign SSL Certificate. Information exchanged with any address beginning with https is encrypted using SSL before transmission.
 <b>Identity Verified</b>	USA HOCKEY has been verified as the owner or operator of the Web site located at www.usahockeyregistration.com. Official records confirm USA HOCKEY as a valid business.

For your best security while visiting sites, always make sure the address of the visited site matches the address you are expecting to see. Make sure that the URL of this page begins with "https://seal.verisign.com"

>> [REPORT SEAL MISUSE](#)

Also remember that by registering online

1. To begin, go to <http://www.usahockeyregistration.com/>
2. Choose the first available option “ICE PLAYERS & COACHES”

## Welcome to the official USA Hockey Online Registration Web site!

Choose Your Member Type to Register Online\*:



Ice Players & Coaches



Ice Officials (Referees)



Inline Members (Players, Coaches, Referees)



Allied Members (Non-Participants, Friends, Fans)

\*USA Hockey Online Registration accepts Visa, MasterCard, American Express and Discover.



3. When you get to the next page, Check the Box to indicate that you are over 18 Years Old and click “Continue”

### USA HOCKEY ICE PLAYER/COACH ONLINE REGISTRATION

**CONFIRM THAT YOUR LOCAL PROGRAM IS PARTICIPATING BEFORE YOU CONTINUE.**

STEP 1: Complete this online registration process, and you will receive a confirmation page that confirms you are registered with USA Hockey and your Affiliate.

STEP 2: Bring your confirmation page to your local program or email it to their designated representative to be claimed by a program and placed on a team. This step is required to ensure that all USA Hockey benefits are in place.

*\*You must be 18 years or older to participate in Online Registration. If you are not 18 years of age or older, a parent or guardian must complete this process on your behalf.*

I am currently 18 years of age or older:\*



(\* indicates required information)

▶ CONTINUE

4. Select the Season you are registering for: (**Choose RED 2008-09**)

Select the Season you are registering for:

**2008-09** (Valid Sept 1, 2008 - Aug 31, 2009) ▶

5. Select who you are Registering: **“A Child Family Member (Under 18)”** and click **“Continue”**

**2008-09** (Valid Sept 1, 2008 - Aug 31, 2009)

Select Who You Are Registering: \*

Myself  
 A Child Family Member (Under 18)  
 An Adult Family Member (18 and over)  
 An Adult Non-Family Member

(\* INDICATES REQUIRED INFORMATION)

▶ CONTINUE

6. Please fill in the following information for the person you are registering: At the bottom of the sheet, read the **Waiver of Liability** and check the **“I ACCEPT”** box, Enter your Initials and click **“Continue to Checkout”**

Participant Information (* INDICATES REQUIRED INFORMATION)	
First Name: *	<input type="text"/> Please use legal name, not nickname.
Middle Initial	<input type="text"/>
Last Name: *	<input type="text"/>
Birthdate: *	MM <input type="text"/> DD <input type="text"/> YYYY <input type="text"/>
Gender: *	<input type="radio"/> Male <input type="radio"/> Female
Citizenship: *	<input type="radio"/> USA <input type="radio"/> CAN <input type="radio"/> Other
Address 1: *	<input type="text"/>
Address 2	<input type="text"/>
City: *	<input type="text"/>
State: *	<input type="text"/>
ZIP Code: *	<input type="text"/>
Country: *	<input type="text"/>
Canadian Postal Code:	<input type="text"/> Canadian Postal Code required for non USA residents only.
Email Address:(Optional)	<input type="text"/>

Parent1 Information (Required)	
Parent First Name: *	<input type="text"/>
Parent Last Name: *	<input type="text"/>
Relationship: *	<input type="radio"/> Mother <input type="radio"/> Father <input type="radio"/> Guardian
Email Address: *	<input type="text"/>
Repeat Email Address: *	<input type="text"/>
Primary Phone: *	<input type="text"/>
Secondary Phone	<input type="text"/>
Would you like to make a \$5 tax-deductible donation to the USA Hockey Foundation? *	<input type="radio"/> Yes <input type="radio"/> No <a href="#">What is the USA Hockey Foundation?</a>
Parent2 Information (Optional)	
Parent First Name:	<input type="text"/>
Parent Last Name:	<input type="text"/>
Relationship:	<input type="radio"/> Mother <input type="radio"/> Father <input type="radio"/> Guardian
Email Address:	<input type="text"/>
Waiver	
<p>Waiver of Liability, Release Assumption of Risk &amp; Indemnity Agreement (executed during online registration)</p> <p>It is the purpose of this agreement to exempt, waive and relieve releasees from liability for personal injury, property damage, and wrongful death, including if caused by negligence, including the negligence, if any, of releasees. "Releasees" include USA Hockey, Inc., its affiliate associations, local associations, member teams, event hosts, other participants,</p>	
I Accept: *	<input type="checkbox"/>
Enter Your Initials Here: *	<input type="text"/>
(* INDICATES REQUIRED INFORMATION)	

[▶ CONTINUE TO CHECKOUT](#)

7. Select the State your player will be playing in this next season: At the drop down Menu – choose **WI** and click **“Continue”**

REGISTRATION STEP 4: PLAYING STATE SELECTION	
Please select the state you will play in for this season. If you will play in more than one state, please select the state you will play in the most.	
If you are attending a Junior tryout or playing Juniors this year, select the state you live in.	
What state is your team based in?	<input type="text" value="WI"/>

[▶ CONTINUE](#)

8. Verify the information is correct and if so, Check the box **“I Confirm the above Information is correct.\*”** You can then either click **“Continue”** or **“Register Someone Else”**.

CART SUMMARY & DATA VERIFICATION	
<b>Savannah Kopf</b>	<a href="#">▶ EDIT</a> <a href="#">▶ DELETE</a>
Birthdate: Aug 1, 1998	
Ice Player and/or Coach	
<input checked="" type="checkbox"/> <b>I confirm the above information is correct.*</b>	
USA Hockey Cost	\$30.00
Affiliate Cost	\$10.00
Affiliate Name: Wisconsin Amateur Hockey Association	
<b>Total \$40.00</b>	
<a href="#">▶ REGISTER SOMEONE ELSE</a>	<a href="#">▶ CONTINUE</a>

9. Billing Information: Fill out the Required fields (\*) and then check the box in the middle confirming that **“I Understand that USA Hockey has a no refund policy”** and click **“PAY NOW”**

BILLING INFORMATION	
Cardholder Name:*	<input type="text"/>
Exactly as it appears on the credit card being used	
Credit Card Type:*	<input type="text"/>
Credit Card Number:*	<input type="text"/>
With no dashes or spaces	
Credit Card Exp. Month:*	<input type="text"/>
Credit Card Exp. Year:*	<input type="text"/>
No Refund Policy:*	<input type="checkbox"/> I understand that USA Hockey has a no refund policy.
Address 1:*	925 Keenan Lane
Address 2	<input type="text"/>
City:*	Stoughton
State:*	WI
ZIP Code:*	53589
Country:*	USA
Canadian Postal Code:	<input type="text"/>
Canadian Postal Code required for non USA residents only.	

(\* INDICATES REQUIRED INFORMATION)

Be sure to open the link to your confirmation page on the next screen. Allied Members will not see a link, but will receive an email message.

By submitting this information, you agree to the terms of the USA Hockey privacy statement which can be viewed [here](#). If you do not agree to the terms, please click the Cancel button.

[▶ CANCEL](#) [▶ PAY NOW](#)

## 10. Registration Confirmation:

### REGISTRATION CONFIRMATION

Be sure to open the link to your confirmation page below. Allied Members will not see a link, but will receive an email message.

- Ice Players and/or Coaches: Open the file below and print the page or save the file to your hard drive. You must take or email this page to your local program(s) so they can complete your registration to allow you to participate in on-ice activities and to ensure that all USA Hockey benefits are in place. You may go online and request an additional copy of this page at any time.
- Inline Players, Coaches, and/or Officials : Open and print the file below or save to your hard drive. This document provides a permanent record of your registration for the season and can be used as proof of registration.
- Ice Officials: Open and print the file below or save to your hard drive. This document provides a permanent record of your registration for the season.

Registrant: Savannah Kopf

Category: Ice Player and/or Coach

Season: 2008-09

Confirmation: [CLICK HERE TO OPEN AND PRINT](#)

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▶ CONTINUE

11. When you click to Open and Print your Confirmation page, it is **VERY Important**, that you bring this Confirmation Page along to Stoughton Youth Hockey's Registration **OR** send it along with your Registration to **SYHA**  
**P.O. Box 351**  
**Stoughton, WI. 53589**