

myEZreg - Account Creation Steps & Registration

<https://app.myezreg.com/Leagues/Login/mldfwtx>

Below, you will find Instructions for Setting up your Family Account on myEZreg. **IF YOU ALREADY HAVE A FAMILY ACCOUNT GO TO STEP NUMBER 8.**

- 1) If you do not already have a Family Account, you need to click "Click here to create a family account". See below.



Welcome to the Halftime Sports Registration Page

IMPORTANT If you have an account type in your username (email) & password. If you do NOT have a family account "create family account" & follow the instructions. Have questions contact Bob @ 404-530-5109 - A \$25 processing fee applied to all Refunds BEFORE the registration deadline. AFTER the deadline, all refund requests will be less an ad prorated amount.

If you already have a family account and want to register a family member, enter your Email and Password b

Have an account? - Sign in **Do not have an account**

*Email:

*Password:

(CaSe SenSitive)

[Forgot Password?](#)

If you have never registered before you'll need to cre account. If you have registered for programs in the p in to the left.

Why am I creating an account? By creating an account you establish a record with this organization. By creating the account you login at any time to manage your account, update information, or even make payments for online registrations.

- 2) Enter the information on the Create Account Screen, click "Create". Note: use a valid email that you own and can access.

Create Account

Account Information

*Email:

*Confirm Email:

*Password:

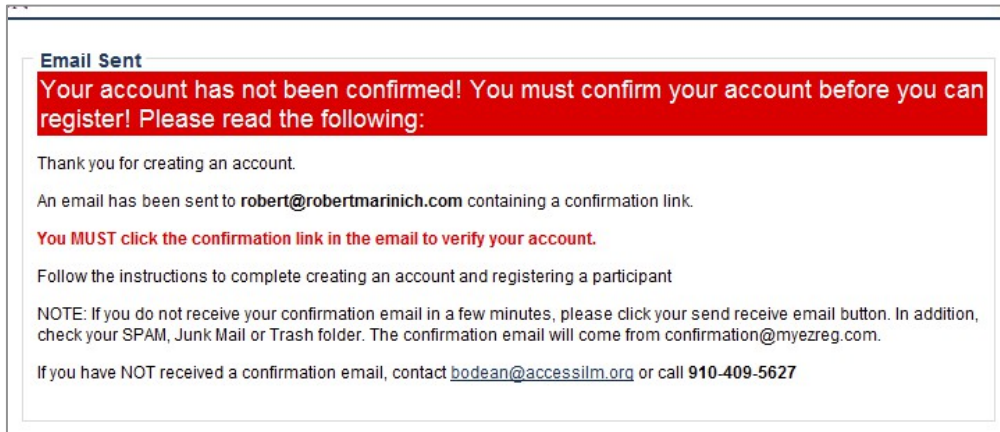
*Confirm Password:

*First Name:

*Last Name:

[Back to Login](#)

- 3) You will receive a message that states, you must confirm your account before you can register. It is important to read this message. See example below.



- 4) The system will send you a confirmation email. You will need to click on the link that is provided on the email. This confirms that you are requesting an account. Important, at this point you will be asked to enter the email and password you created. Doing so will take you to the Create Family Account screen. Follow the instruction, important, enter **your** information. You will be asked later to provide the **participants** information. If you are an adult signing up yourself you will want to check the box at the bottom of the page, if you are signing up another family member DO NOT CHECK the box. When done, click "Create".

LAST if you do not receive a confirmation email, first check your spam or junk mail folder. If it is not there, contact your league director or email bob@myezreg.com for assistance.

Create Family Account

Family Account

*Address:

Address2:

*City: *State: *Zip:

*Primary Phone: We will use this number as your primary contact number

*Secondary Phone:

Click here if you are signing up only yourself:

If you are signing up a child or family member, leave the checkbox unchecked and click the create button below

- 5) Next you will be asked to create/complete the Parent/Guardian information. Follow the instructions. If you wish to add a second Parent/Guardian, you are provided the option. Click “Create”. Details on next page:
- add your Birthdate
 - add your County
 - add a secondary Contact and their phone numbers. If you do NOT have a secondary contact use your name and your phone number again.
 - Next you may add a secondary contact or click “Create”

THROUGH SPORTS

Create Parent

Primary Guardian

*First Name: tom

*Last Name: martin

*Gender: Female

*Date of Birth: Or check the box below
 I am over the age of 18

*Address: 321

Address2:

*City: wa

*State: ga

*Zip: 30004

*County:

*Primary Phone: 555-555-5555

*Secondary Phone: 555-555-5555

*Email: tommy@localhost.com

Please provide a secondary emergency contact below:

*Secondary Contact First Name:

*Secondary Contact Last Name:

*Secondary Contact Phone:

Check here to create a second guardian.

Secondary Guardian

*First Name:

*Last Name:

*Gender: Female

*Date of Birth: Or check the box below
 I am over the age of 18

*Address: 321

Address2:

*City: wa

*State: ga

*Zip: 30004

*County:

*Primary Phone: 555-555-5555

*Secondary Phone: 555-555-5555

*Email:

Please provide a secondary emergency contact below:

*Secondary Contact First Name:

*Secondary Contact Last Name:

*Secondary Contact Phone:

- 6) On the Participants screen you will need to click “Add Participant”
- Add the participant you are trying to register,
 - Fill out the information
 - When complete, scroll down and click “Create”

THROUGH SPORTS

Create Participant

Info

*First Name: Middle Initial: *Last Name:

Gender: Male

*Date of Birth:

*Address: 321

Address2:

*City: wa

*State: ga

*Zip: 30004

*County: Note: County not Country, example: Fulton not, USA

*Primary Phone: 555-555-5555

*Secondary Phone: 555-555-5555

*Email: tommy@localhost.com

Emergency Contact 1

*First Name: tom *Last Name: martin

*Primary Phone: 555-555-5555 *Secondary Phone: 555-555-5555

Emergency Contact 2

First Name: Last Name:

Primary Phone: Secondary Phone:

- 7) Next you will be asked to add create a participant. Follow the instructions and click create. This will take you to your family account screen. At this time you may add another participant by clicking “Add Participant” or you may “Sign-up” your participant by clicking “Sign-up” to the right of the participants name and follow the instructions.

Bob Marinich

General **Participants** Parents Registrations Payments

Add Participant

Name	DOB	Gender	Phone	Edit
marinich, wil	6/4/1997	M	404-630-5109	Sign-up

Save Cancel

- 8) Registering your participant Click Sign-up to the Right of the Participant you want to register.

Name	Gender	Email
wil marinich	M	bob@myezreg.com

Register

2017 Miracle League Baseball Fall

Season: Fall
 Activity Start: 9/23/2017
 Enrollment Start: 1/1/2017
 Player Cost: \$55.00

Gender: C
 Activity End: 11/18/2017
 Late Fee Begins: 9/16/2017

Sport: Baseball
 Enrollment End: 9/16/2017

1

- 9) Next Check the “Accept Policy” checkbox, then click “Proceed to Checkout” **IMPORTANT - If you are signing up a second or more participants click “Register another” and repeat for as many participants as you want. OR Proceed to Checkout**

Register

Participant	Division
wil marinich	2017 Miracle League Baseball Fall

League Policy

(scroll to bottom to accept)

I give authorization to participate in the activities for with they are registering. I know that participation in athletic activities involves numerous risks for injuries or even death to players and even potentially to spectators, and that there are numerous risks for injuries or even death to players and even potentially to spectators, absolve, indemnify, and agree to hold harmless the myLeagueRegistration, LLC, and their organizers, sponsors, board members and volunteers from any claim arising out of any injury to child or me whether the result of negligence or otherwise.

Accept Policy 1

*Registration will not be complete until you have paid and received payment confirmation.

Registration Summary

Player	wil marinich
Division	2017 Miracle League Baseball Fall
Fee	\$55.00

2

Proceed to Checkout Register Another Cancel

10) Next Click "Checkout"

Shopping Cart 1 Item(s)

Item	Amount
2017 Miracle League Baseball Fall for wil marinich	\$55.00
Total	\$55.00

*Payment Method: Credit Card ▼

Checkout Cancel

11) Next Fill out the payment information and click "Checkout"

Checkout

Item	Amount
2017 Miracle League Baseball Fall for wil marinich	\$55.00
Total	\$55.00

*Card Type: Visa ▼

*Name on Card:

*Card Number:

*Expiration: 1-Jan ▼ 2017 ▼

*Security Code:

*Billing Zip Code:

VISA MasterCard

Checkout Cancel

Important if you have any questions or need assistance, please feel free to call me at the number below. Thank you.

Bob Marinich - CEO / Founder



Phone [404-630-5109](tel:404-630-5109)

Email bob@myezreg.com