myEZreg - Account Creation Steps & Registration

PLEASE CLICK HERE FOR PLAYER AND BUDDY REGISTRATION:

https://app.myezreg.com/Leagues/Login/mlcamden

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, please click "Click here to create a family account". See below.

LEAGUE OF CAMDEN COUNTY		Powered by myEZreg
	Welcome to the Miracle League o	f Camden County Registration Page
	If you already have a family account and want to regist	er a family member, enter your Email and Password below:
	Have an account? - Sign in	Do not have an account yet?
	*Password: CaSe SenSitive)	If you have never registered before you'll need to create an account. If you have registered for programs in the past, sign in to the left.

2) Enter the information on the "Create Account" screen and then click "Create".

Note: Please 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 that you must confirm your account before you can register. It is important to read this message entirely. Please see the below example:

	'our account has not been confirmed! You must confirm your account before you can egister! Please read the following:
Th	nank you for creating an account.
An	n email has been sent to robert@robertmarinich.com containing a confirmation link.
10	ou MUST click the confirmation link in the email to verify your account.
0	ollow the instructions to complete creating an account and registering a participant
	OTE: If you do not receive your confirmation email in a few minutes, please click your send receive email button. In addition heck your SPAM, Junk Mail or Trash folder. The confirmation email will come from confirmation@myezreg.com.
f١	vou have NOT received a confirmation email, contact bodean@accessilm.org or call 910-409-5627

4) The system will send you a confirmation email. You will need to click on the link that is provided in the email. This confirms that you are requesting an account. IMPORTANT! - At this point, you will be asked to enter the email and password that you created earlier. Doing so will take you to the "Create Family Account" screen. Follow the instructions. IMPORTANT! Please enter <u>your</u> information. You will be asked later to provide the <u>participant's</u> 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".

Lastly, if you do not receive a confirmation email, first check your spam, promotional or junk email folders. If the confirmation email is not there, contact your league director at <u>camdenmiraclefield@gmail.com</u> or email <u>bob@myezreg.com</u> for assistance.

Family Account			
*Address:			
Address2:			
City:	*State:	*Zip:	
*Primary Phone:	We will use this numb	er as your primary contact number	
*Secondary Phone:			
Click here if you are signing up o	nly yourself:		
If you are signing up a child or family i leave the checkbox unchecked and c			

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

rimary Guardian		Secondary Quardian	
First Name:		First Name:	
	tom		
Last Name:	martin	*Last Hame	
Gender:	Female 💌	*Gender:	Female #
Date of Birth:	Or check the box below	•Date of Birth:	Or shack the hos beby
	I am over the age of 18		I am over the age of
Address:	321		10
ddress?		*Address:	121
		Address 21	
City:	**	*City:	
State:	Q#	* Lines	[##]
Zip	30004		20004
County:		•Zip:	200/4
Primary Phone:	555-555-8555	County:	
Secondary Phone:	555-555-5555	*Primery Phone	555-355-5555
Email:	tommy@localhost.com	 Iscondary Phone 	555-555-6558
and the second second second second	ry emergency contact below :	*Email:	
Secondary Contact First		Plaase provide a secon	idary emergency contact
Secondary Contact Last	Name:	becondary Contant First Name	
Secondary Contact Phon	•	Iscondary Contact Last Name	
		Secondary Contact Phone	

- 6) On the Participants screen, please click "Add Participant"
 - a. Add the participant that you are registering
 - b. Please fill out all of the information
 - c. When complete, please scroll down and click "Create"

reate Participar	it		
Info			
*First Name:		Middle Initial:	*Last Name:
Gender:	Male 💂		
*Date of Birth:			
*Address:	321		
Address2:	-		
*City:	we		
*State:	ga		
"Zip:	30004		
*County:		Lots Court and Court	trj, example, Fulton not, USA
	555-555-5555	Hote: County not Count	ay, example, Partin Inc. Carr
*Primary Phone:			
*Secondary Phone			
*Email:	tommy@localhost.c	om	
	- 23		
Emergency Cont	act 1	*Last Name:	martin
*Primary Phone:	555-555-5555	*Secondary Phone:	555-555-5555
Emergency Cont	act 2		
First Name:		Last Name:	
Primary Phone:		Secondary Phone:	

7) Next, you will be asked to add a participant. Please 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.

				()	
eneral	Participants	Parents	Registrations	Payments	
td Partic	ipant				
dd Partic	ipant				
dd Partic		DOB 6/4/1997	Gender M	Phone 404-630-5109	Edt Sign-up

8) When registering your participant, click "Sign-up" to the right of the Participant that you wish to register. Please ensure that you select the correct option. There will be a "Player" option and a "Volunteers" option.

THE MIRACLE OF CAMDEN COUNT						Pov my E	vered by Zreg
Jeff Norris			Name	Gender	Email		Age
My Account	Register	ing	Jeff Norris	М	camdenmiraclefield@gmail.com		49
Participants	Register	ing	Jen Norths	IVI	camperinnacielleid@gmail.com		49
Parents							
League Actions	Register				Players		
Dashboard		Season: 2020 Spring			Gender: C	Sport: Baseball	
League Info		Activity Start: 1/27/20			Activity End: 5/15/2020		
Accounts		Enrollment Start: 1/2	27/2020		Late Fee Begins: 2/8/2020	Enrollment End: 5/15/2020	
Pending Registrations		Player Cost: \$50.00					
Wait List	Register				Volunteers		
Sports		Season: 2020 Spring Activity Start: 1/27/20	120		Gender: C Activity End: 5/15/2020	Sport: Baseball	
Divisions		Enrollment Start: 1/2			Late Fee Begins: 2/2/2020	Enrollment End: 5/15/2020	
Teams		Player Cost: \$0.00					
Reports							
League Messages	« 1	>					
Logout	« I	20					
Shopping Cart Your cart is empty							
	<u>Return to Pa</u>						
Miracle League of Car	nden County	912-322-1970 camde	enmiraclefield@gm	<u>ail.com</u> King	sland Lion's Park Kingsland, GA 31548 <u>my</u>	EZreg Policy info@myezreg.com	<u>m</u> 3.26.1.0

9) Next, please read the League Policy. You must read the entire policy (scroll all the way down) and please 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 then repeat for as many participants as needed. Once you have completed this process for all participants, please click "Proceed to Checkout."

Participant	Division
wil marinich	2017 Miracle League Baseball Fall
League Policy	
(scroll to bottom to acce	pt)
injuries and that there a absolve, indemnify, and	articipate in the activities for with they are registering. I know that participation in athletic e re numerous risks for injuries or even death to players and even potentially to spectators, agree to hold harmless the myLeagueregistration, LLC, and their organizers, sponsors, unterest from any claim arising out of any injury to child or me whether the result of neglig
	e complete until you have paid and received payment confirmation.
Registration will not t	
	mary
Registration will not b Registration Sum Player	mary wil marinich

10) Next, please click "Checkout".

Note Volunteers will need to complete the checkout process. There is no charge for volunteers and you will see the "Amount" of \$0.00. If you are registering as a volunteer and see a cost in the "Amount" column, you made an incorrect selection. Please go back and ensure you pick the volunteer division.

ltem	Amount
2017 Miracle League Baseball Fall for wil marinich	\$55.00
Total	\$55.00
Payment Method: Credit Card	
Checkout Cance	

11) Next, please fill out the payment information and click "Checkout"

PLEASE NOTE – Incomplete registrations are only stored on the website for 3 days. After 3 days, the pending registrations are deleted. This is a function of the website and I'm told it cannot be adjusted or removed. So, please be ready to complete your registration when you begin the process to avoid frustration and wasted effort.

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

Jeff Norris

912-322-1970

camdenmiraclefield@gmail.com