



## Hawaii Youth Soccer Association

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### HOW TO OBTAIN A HYSA COACH/ADMINISTRATOR PASS (ADULTS ONLY)

1. Check your current pass for the expiration date (found on the backside of your pass). If pass will be expiring within 60 days or less, or if pass has already expired, go to hawaiisoccer.com.

Click on "Registration"

Click on "How to Register"

Or you can use the following link

<https://secure.sportsaffinity.com/reg/Public/registration/login.aspx?domain=hysa-stateleague.affinitysoccer.com&language=english&sessionguid=>

For replacement passes, go to hawaiisoccer.com and click on "Registration," then "How to Register" and look for the replacement pass link.

For new applicants (does not have an account), click on above link.

Note: Even if you have not ever received a HYSA pass, you may still have an account. If this occurs, you will need to register under this account as Affinity does not allow "duplicate" accounts. If you are having trouble, send email to hysarm@yahoo.com

2. Once at the logon screen, make sure you are registering for the correct season.

Note: No refunds will be issued if registering in the wrong season.

3. Once logged on, you may see other family members linked to your account. Make sure to register yourself only.

**DO NOT REGISTER ANOTHER FAMILY MEMBER WHILE LOGGED INTO YOUR OWN ACCOUNT.**

Each HYSA member has his/her own unique username and password and if registering for a HYSA pass, said member must log on with their own username and password. Failure to do so will result in a DELAY as we will need to research and correct said application.

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

### Select registration type(s) ?

Select a season: \*

2017-2018

Select registration type(s): \*

Coach / Admin Registration

\* are required fields

MAKE SURE YOU ARE REGISTERING FOR THE CORRECT YEAR

### Returning users, please login. ?

*Remember to select a season & registration type before logging in!*

Enter Username\*

Username

Enter Password\*

Password

[Forgot Username or Password?](#)

For new accounts only. If you have an existing account, log on with your username & password

Login

Don't have an Account?

Create New Account

[Add Family Member >>](#)[Create Registration >>](#)[Accept ELA >>](#)[Make Payment >>](#)[Print Form](#)

### Account Primary Contact

**Name:** Robin Kakutest  
**Address:** 1060 Richards St Honolulu, HI 96813-2908  
**Phone:** (808) 722-7514(h)  
**Email:** [stampingsensei@gmail.com](mailto:stampingsensei@gmail.com)

Please add all your missing family members who need to be registered now or later. All added Name, 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	Edit
Robin Kakutest	86889-841727	07/23/1970	F	No Relationship	<a href="#">Edit</a>

Press edit if need to make changes

Register yourself only-DO NOT REGISTER ANYONE ELSE

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Register Only Members Who Participate This Season ( 2017-2018 )



Name	ID Num	DOB	Relationship	Registration
Robin Kakutest	86889-841727	07/23/1970	No Relationship	Register as Coach/Admin

If you would like to add additional family members please click the back button.

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**Please register at least one family member above to Continue.**



Robin Kakutest

Select Play Level

Play Level\*



Select one ---- ▼

Select play level  
"Adult Risk Management"

Cancel




\*Required


\*\*Just One Required

MANAGEMENT FOR STAFF EMPLOYEES

Robin Kakutest

Gender\* Female Birthdate\* July 23 1970

  [Click here to show photo or certification upload\\*](#)  
Required: 'Photo' 

 Click to upload photo

Make sure to upload headshot photo of yourself only; no hats, sunglasses or shirtless photos will be accepted

**Address Information**

Address Line1\*  
1060 Richards St

Address Line2

City\* State/Province\* Zip/Postal Code\*

No  Yes

Other than the above, is there any reason minors should NOT be entrusted to your care?\*

No  Yes

If you answered yes to any of the above please explain

Have you ever been denied membership to HYSA? Include appealed instances

Save & Register Another

Save & Next Page

Cancel

\*Required

\*\*Just One Required

Select Save & next page when done



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## Accept ELA

### 1 of 1 Volunteer Disclosure

I UNDERSTAND THAT: A. It is the policy of USYS/HYSA and its member leagues to exclude or deny membership to persons convicted of certain crimes or whose prior history includes sexual misconduct, abuse of alcohol, use of illegal drugs, or conduct that casts serious doubt on my ability to be entrusted with the supervision, guidance, and care of minor children. B. In applying for a USYS/HYSA or league position, the accuracy and completeness of the information that I have furnished on this form is subject to verification, which may include a criminal background and history check. C. If admitted as a member, I hereby agree to abide by FIFA, USSF, HYSA/USYS league, and club By-laws, rules, regulations, policies, and procedures. I further agree that it is my responsibility to know and understand the aforementioned. I submit this form of my own free will. D. As a member, I will notify HYSA as soon as possible of any additional convictions occurring and failure to do so may result in my immediate suspension and/or other possible sanctions.

I Accept

Your First Name\*

Robin

Your Last Name\*

Kakutest

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[Agree & Continue >>](#)

Read &  
Accept then  
press  
Agree &  
Continue



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## Make Payment

### Registration Fee

Items Ordered

Product	Promo Code	Qty	Price*Qty
✓ Robin Kakutest, AdminFee, Under 6 ,Adult Risk Managment		1	10.00
1 item(s) totaling:			10.00
Order Total:			10.00
Total Due:			10.00

Payment Method\*

Choose One

[Continue >>](#)

Enter payment information and continue to Background Check screen. **YOU MUST SUBMIT YOUR BACKGROUND CHECK INFORMATION.** Failure to do so will result in an **INCOMPLETE APPLICATION** which will **NOT BE PROCESSED**