

All Admins are required to complete and pass a background check.

To complete a background check, visit: sdysa-jdp.sportsaffinity.com and complete the online application.

1. On the Welcome page, click Registration in the top right corner to get started.
2. Select the season.
3. Choose **Background Check** as your registration type.

Returning Coaches: If you are a returning coach from 19/20 or 18/19, please do not create a new account. Please use the Forgot Username or Password? link to reset your password.

New Coaches and Volunteers: Please Create New Account.

[<< Back to Main Page](#) Traducir en Español

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

<div style="background-color: #0070C0; color: white; padding: 5px;">Select registration type(s) ?</div> <p>Select a season: *</p> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;">2020-2021 ▾</div> <p>Select registration type(s): *</p> <p><input checked="" type="checkbox"/> Background Check</p> <p><small>* are required fields</small></p>	<div style="background-color: #0070C0; color: white; padding: 5px;">Returning users, please login. ?</div> <p><i>Remember to select a season & registration type before logging in!</i></p> <p>Enter Username*</p> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;">Username</div> <p>Enter Password*</p> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;">Password</div> <p>Forgot Username or Password?</p> <p style="text-align: center;">Don't have an Account?</p> <div style="text-align: right; margin-top: 10px;">Login Create New Account</div>
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4. Once your account has been created the application will ask if you need to add any family members. If there are no family members to add, please click **Continue**.

Important Note: Only the user logging will be able to have a background check registration processed. If adding additional family members, spouses, etc, they will each need to log in with their own username and password to complete a registration

Account Primary Contact

Name: Jacob HeadCoach
Address: 678 Maple Lane Main, VA 12345
Phone: (111) 111-1111(h)
Email: noemail@coach.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
Jacob HeadCoach	87777-951189		M	Guardian	Edit

5. Please select Register as Coach/ Admin button across from your name to begin your application.

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

Register Only Members Who Participate This Season (2018-2019 Season)

Name	ID Num	DOB	Relationship	Registration
Jacob HeadCoach	87777-951189		Guardian	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.

6. After you make this selection, a pop-up window will appear on your screen. Select BGC as your play level from the drop-down menu.

7. On the application, any fields marked with a red asterisk (*) are required to be filled out. Please click the down arrows to expand the drop-down menus. This will provide an area to upload your photo or certificates.

Personal Information

First Name*	Initial	Last Name*	Suffix
Jacob		HeadCoach	▼

Gender*	Birthdate*		
Male ▼	▼	▼	▼

 Click here to show photo or certification upload
Click to upload photo

8. Choose your Primary Club and Secondary Club if applicable

Club Detail Additional Information

Please select your Primary Club below: SID is for Affinity internal use Only*

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Please select your Secondary Club below: SID is for Affinity internal use Only

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9. Once all information has been entered/ uploaded on the application please scroll down and click Save & Next Page.
10. Next, read and accept any ELAs (Electronic Legal Agreements) by checking the box across from each agreement. Once all boxes have been checked click Agree & Continue.

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

Click on a completed (green) step to go back to it. You cannot go back after accepting the ELA.

Accept ELA

1 of 1 COVID-19 Waiver

In consideration of being allowed to participate in any way in any program, event, or activity sponsored or authorized by South Dakota Youth Soccer Association and/or any affiliated member, I the undersigned, acknowledge, appreciate, and agree that: I am aware there are risks to me of exposure to, directly or indirectly, arising out of, contributed to, by, or resulting from an outbreak of any and all communicable diseases, including but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE SOUTH DAKOTA YOUTH SOCCER ASSOCIATION AND ITS AFFILIATED MEMBERS, and their respective officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct any program, event, or activity (RELEASEES), from any and all claims, demands, losses, and liability arising out of or related to any ILLNESS, INJURY, DISABILITY OR DEATH I may suffer, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

I Accept

Your First Name* Your Last Name*
 John Smith

[<< Back](#)
[Print](#)
[Agree & Continue >>](#)

11. There is no fee collected from coaches for background checks. Please click No Payment due, Continue.

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

Make Payment

Registration Fee

Items Ordered

No items in order.

Payment Method*

Choose One

Continue >>

No fee due: Please make sure a fee is not needed and click the Continue button below.

No Payment due, Continue >>

12. On the next page, choose the Continue to Background Check button.

The screenshot shows a navigation bar at the top with five buttons: 'Add Family Member >>', 'Create Registration >>', 'Accept ELA >>', 'Make Payment >>', and 'Print Form'. Below this is a blue header for the 'Print Form' section. The main content area contains a paragraph of text explaining the partnership with JD Palatine for background checks and the requirement for a Social Security number. A prominent green button labeled 'Continue to Background Check >>>' is centered on the page. At the bottom center, there is a blue button labeled 'Print Receipts & Forms'.

NOTE: South Dakota Youth Soccer Association has partnered with the background check company JD Palatine to run Risk Management. In order to process your background check your Social Security must be provided.

13. Please enter your social security number and choose the Submit BGC button to submit your profile for processing. *Your Risk Management application is not finalized until this is completed.*

Background Checking

Please make sure the person you submit to background check has correct name, DOB.

Please only submit one time, your order status will be pending.

Person to be checked:					
Last Name	First Name	Middle Name	DOB	Driver License	BGC Account:
Smith	John		05/14/1983		South_Dakota / South_Dakota
1 Main Street Rapid City SD 57701					
email:jsmith@noemail.com Club: Background Check Club					

Background Check Provider	Enter SSN: * Required		Submit BGC
JD Palatine			

14. Click OK on the system generated alert.
15. The screen will refresh to display the confirmation of your submission and your Order ID.
16. Your background check application has been submitted. You may now exit out of the screen.