

Step 1: Open your web browser & go to the Athlete Connection website.



Step 2: Either log on, or create an account. If you are having trouble remembering your user name & password, please email or call the Sports Medicine staff! We can help you!

Please only create 1 account per student athlete.

If you have already created an account, please disregard Step 3. If you have not created an account before, please complete Step 3.

A screenshot of the 'Log On' page on the Athlete Connection website. The page has a light gray header with the text 'Log On'. Below the header, there are two input fields: 'User name' and 'Password'. Blue arrows point to each of these fields. To the right of the input fields, there is a text box containing the following instructions: 'If you have created an account before, use the user name and password you created. Or, if you do not have an account, use the "Click here to register" link below.' Below the input fields, there is a link that says 'Forgot your password?'. At the bottom of the page, there is a link that says 'Don't have an account? Click here to register' with a blue arrow pointing to it, and a red 'Log On' button.

Step 3: If you have not created an account before, please register a new account. Please use the “Account Group” number below (10619) and the “Account Code” number below (5625568). These numbers are for all Lake Highland Preparatory School athletes.

The first name, last name and email address should be the student athlete’s information.

The user name and password you are allowed to choose, but please make it something you will remember! Write it down somewhere if need be! You will use this every time forms or medical updates need to be submitted.

Register

Only register if you have not created an account before!! Do not create multiple accounts for the same athlete!

Complete the information below to create a new account. All fields are required.

Account group:

10619

Account code:

5625568

First name:

Last name:

E-mail address:

User name:

Password:

Confirm password:

This should be the STUDENT-ATHLETE’s information

Choose a user name & password you will remember!
Write it down!

Cancel

Register

Step 4: Fill in the “My Information” section. This is the student-athlete’s information! When finished, please click “Continue to Next Section”. It will automatically save what you have entered.

My Information

This is the student athlete’s information!

First name

Last name

Date of birth

Gender

☐ Male ☐ Female

Home phone

Work phone

Mobile phone

Pager

E-mail address

Instant messenger address

Home address

Work address

Continue to Next Section

Step 5: Fill in the “Primary Emergency Contact” section. This is a parent or guardian’s information. When finished, please click “Continue to Next Section”. It will automatically save what you have entered.

Primary Emergency Contact

Name

This field is required.

Relation

This field is required.

Home phone

This field is required.

Work phone

This field is required.

Mobile phone

This field is required.

Pager

E-mail address

This field is required.

Instant messenger address

Home address

This field is required.

Work address

This section is for one of the parent/guardian’s information.

All red boxes are required to fill in.

Continue to Next Section

Step 6: Fill in the “Secondary Emergency Contact” section. This is a different parent or guardian’s information that was not already used. When finished, please click “Continue to Next Section”. It will automatically save what you have entered.

Secondary Emergency Contact

Name

This field is required.

Work phone

Instant messenger address

Home address

This field is required.

Relation

This field is required.

Mobile phone

This field is required.

Home phone

This field is required.

Pager

E-mail address

This field is required.

This section is for the other parent/guardian’s information.
All red boxes are required to fill in.

Continue to Next Section

Step 7: *Optional* Fill in the “Primary Physician” section. This section is optional, but can be used to store the pediatrician’s information.

Primary Physician

Physician name

Office phone

Mobile phone

Pager

E-mail address

Office address

This is the optional primary physician information for the student athlete.

Continue to Next Section

Step 8: ***Optional*** Fill in the “Secondary Physician” section. This section is optional, but can be used to store the information for a specialist or other doctor that the student-athlete frequently sees.

Secondary Physician

Physician name

Office phone

Mobile phone

Pager

E-mail address

Office address

This is the optional secondary physician information for the student athlete.

Continue to Next Section

Step 9: Fill in the “Primary Insurance Policy” section. This is the insurance policy that the student-athlete is covered by. If the student-athlete is not covered by healthcare insurance, please check the box that says “I do not have healthcare insurance”. When finished, click “Continue to Next Section”.

Primary Insurance Policy

☐ I do not have healthcare insurance

This is the primary insurance policy that the student athlete is covered by.

The red boxes are required.

Policy Details

Provider name

This field is required.

Provider phone

This field is required.

Provider address

Coverage

☒ Medical ☐ Dental ☐ Vision ☐ Rx

This field is required.

Policy type

☐ HMO ☐ PPO ☐ Other ☐ Unknown

This field is required.

Policy number

This field is required.

Group number

This field is required.

Contract code

Service code

Effective

Expires

Employer notification is required

☒ Yes ☐ No

Authorization is required

☐ Yes ☒ No

Policy Owner

Name

Relation to insured (you)

Date of birth

Identification #

Add Another Policy

Continue to Next Section

Step 10: Fill in the “Notes” section. Please note any Medical History that is pertinent, or any Medical Alerts that staff should be aware of. Please be as specific as possible. When finished, click “Continue to Next Section”. It will automatically save what has been entered.

Notes

Medical history

This field is required.

Medic alert

This field is required.

This notes section is for any applicable medical history or medical alerts that the Sports Medicine staff needs to be aware of.

Please be as specific as possible! Injuries should list which side of the body and the date it occurred. Medications, general illnesses, chronic conditions, surgeries, etc.

These boxes are required even if there is no pertinent information. If this is the case, please write “Not Applicable”.

Continue to Next Section

Step 11: Please click on the links found in this section. It will automatically open a blank copy of a required FHSAA form. Please print the forms, fill them out completely, and make sure they are signed and dated in all the correct places.

Links

The following links are provided for your reference:

EL2

http://www.fhsaa.org/sites/default/files/el02_physical_2.pdf

EL3

http://www.fhsaa.org/sites/default/files/el03_consent_8.pdf

These are the required FHSAA forms for each student athlete. They are each only valid for 1 calendar year from the date of physical exam or date of signature.

When you click on each “Link”, it will automatically download the blank form to your computer. If it does not download, check your pop-up blocker.

Continue to Next Section

Step 12: Upload the required FHSA forms to this section – “My Uploads”. To upload the forms, either scan it as a PDF (preferred method!) or take a photo (clear, legible, original size) of the form. Click anywhere in the blank box and you will be asked to choose a file from your computer’s documents. Choose the appropriate files to upload. It is very helpful to the Sports Medicine staff, and to you, if the files are named according to which document they are.

My Uploads

Drop files or click on the file area below to upload files to your profile.

Please upload the required forms, signed & completed, provided above in the "Links" section as they are all required for participation. It is mandated by the FHSA that all of these forms be on file before your child may participate in interscholastic athletics. PLEASE NAME THE FILES TO CORRESPOND TO WHAT FORM THEY ARE! Thank you.

Once the forms are complete, they must be uploaded here. Please save as a PDF file when possible! If not possible, take a clear, legible photo of the entire form & upload it as a JPEG.

Click anywhere in the blank box & it will ask to choose a file from your computer’s documents. Please name the files according to which document they are so there is no confusion when uploading the forms.

Drop files here to upload
(or click to select a file)

Sign and Submit Your Profile

Step 13: You will see a green checkmark, and a date/time stamp on the file once it has successfully uploaded. If you need to remove a file, click “Remove File”. If you do not see the green checkmark or date/time stamp, the file has NOT uploaded successfully. Please try again.

My Uploads

Drop files or click on the file area below to upload files to your profile.

Please upload the required forms, signed & completed, provided above in the "Links" section as they are all required for participation. It is mandated by the FHSA that all of these forms be on file before your child may participate in interscholastic athletics. PLEASE NAME THE FILES TO CORRESPOND TO WHAT FORM THEY ARE! Thank you.

EL2 Physical.pdf
10/15/2015 4:37:PM
0.1 MiB
Remove File

EL3 Consen. Liability.pdf
10/15/2015 4:37:PM
0.1 MiB
Remove File

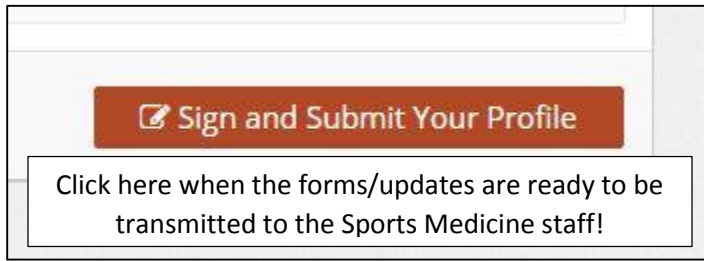
EL3CH Addendum.pdf
10/15/2015 4:37:PM
0.2 MiB
Remove File

EL3CH Concussion & Heat Liability.pdf
10/15/2015 4:37:PM
0.1 MiB
Remove File

When a file has successfully uploaded to the account, a green checkmark will appear in the corner, as well as a date and time stamp underneath the name of the document.

A file can be easily removed by clicking “Remove File”.

Step 14: Once the forms are uploaded successfully, and all sections have been filled out, click on “Sign and Submit Your Profile”. You will be prompted to enter your user name and password again.



Step 15: Log off! Click on the “My Profile” button at the top of the page, and log off.

