

**Special
Olympics**
British Columbia



New Volunteer Registration Instructions

Pre-requisites:

- You are new to Special Olympics
- You have access to your email
- You are 18 years old or above and have guardianship over yourself
(If not, please print out the waiver and have it signed by your guardian/parent, and return it to your local registration coordinator.)

Version 2.0 (October 2023)

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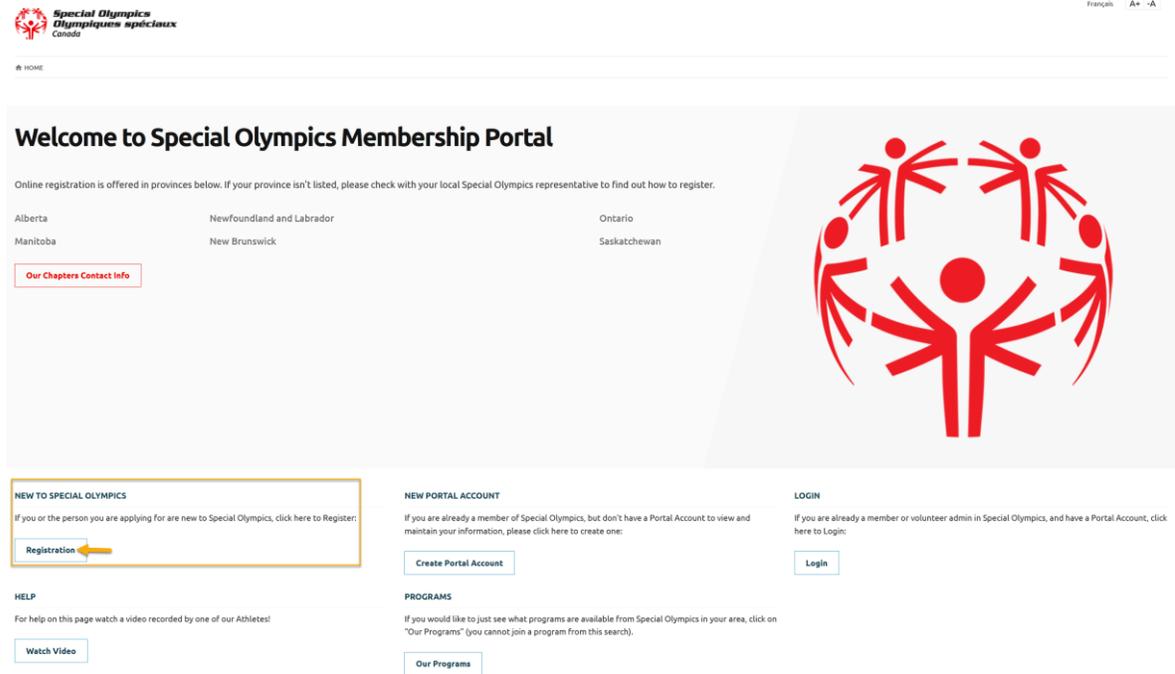
URL to the Registration Portal

Copy and paste Membership Portal URL to browse and follow the instructions

<https://portal.specialolympics.ca/>

Step 1 - Create Portal Account

➔ From **Home Page**, Select **Registration**



➔ Select **For Myself** from the screen

PLEASE IDENTIFY YOUR CATEGORY

REGISTERING YOURSELF

- If you are **under 18**, or not your own Legal Guardian, you can still fill out this application.
- You will be asked to provide your **Legal Guardian's** information so they can consent.

PARENTS/GUARDIANS AND GROUP HOME COORDINATORS

- Select the option "For someone else" **then** "Parent/Guardian" or "Group Home Coordinator".
- On the next page, put **YOUR** information, not the Athlete's to register yourself,
- Then, you'll be able to **register** your child/ward or group home resident.

I'M REGISTERING



- Carefully read the message provided in the pop-up window, which explains what information you need to have to fill out your application.
- Select **Volunteer/Coach** from the screen **Tell us Who you are..**

Welcome to the Special Olympics Membership Portal Let's Get Started!

I'M A NEW MEMBER - WHAT INFORMATION DO I NEED TO FILL IN REGISTRATION PAGES?

ALL APPLICANTS

[Emergency Contacts](#)
Be ready to give contact information for up to two people who can help in an emergency

[Medical Information](#)
Do you have Down Syndrome, Allergies, Seizures?

VOLUNTEER APPLICANTS

[Personal References](#)
Two personal references from people not related to you. If you don't have this now, you can still submit this application but you will be approved later when you give the references.

TELL US WHO YOU ARE

[Athlete/Unified Partner](#) [Volunteer/Coach](#) ←

[Back](#)

➔ Select **SO British Columbia** from the **Your Province/Territory** drop-down field

➔ Fill out the four fields: **First Name** (your legal first name), **Last Name**, **Date of Birth**, and **Email Address**

Welcome to the Special Olympics Membership Portal Let's Get Started!

YOUR INFORMATION

Province / Territory *(required)*

First Name *(required)*

Last Name *(required)*

Date of Birth - MM/DD/YYYY *(required)*

Email Address *(required)*

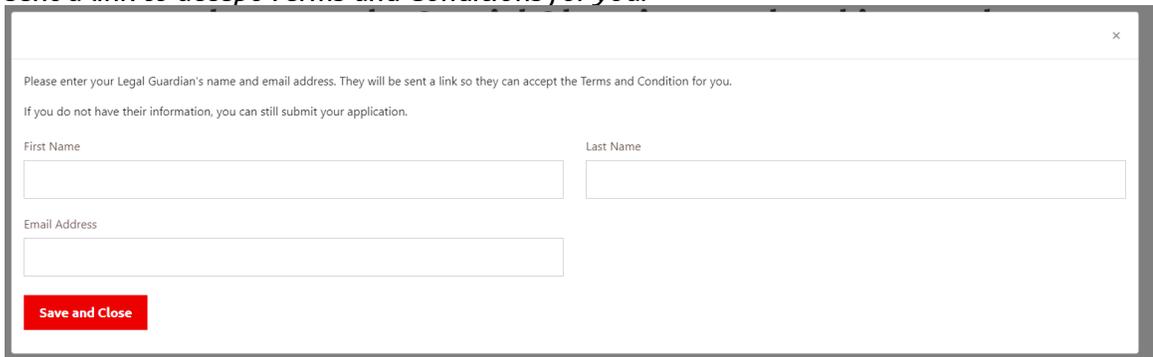
Do you have Guardianship over yourself? Are you able to sign for yourself when renting an apartment or opening a bank account? *(required)*

Next Step

➔ Select **Yes/No** from **Do You have Guardianship over yourself?** field.

Yes: you are **18 years old or older** and have guardianship over yourself. You will be able to fill out your waivers online.

No: *A new window will pop up for you to fill in your legal guardian's information. They will be sent a link to accept Terms and Conditions for you.*



Please enter your Legal Guardian's name and email address. They will be sent a link so they can accept the Terms and Condition for you.

If you do not have their information, you can still submit your application.

First Name

Last Name

Email Address

Save and Close

Click **Save and Close** after you finish the entry. If you do not have the information now. You can close the window by clicking "x" on the top right corner. You will be able to process with the application and your local will contact you for the Terms and Conditions answer in a later time.

➔ After appropriate selection, click **Next Step**

As you are a new volunteer, our system won't find you as a registered member, so it will welcome you to create your portal account as a new member.

- ➔ Enter the same Email address again in **Reenter Email** field and password in **Password & Repeat Password** fields

(Note: Please follow the **Password Rules** to enter password. Click on **Eye** icon to see your password.)

- ➔ Click **Create Portal Account**

[Submit Application for programs](#)

After you have created an account on the portal, complete the below steps to submit your application.

Step 2 – Program Search & Add Club Enrollment

1. In the **Program Search** window, select **“SO British Columbia”** as the Chapter/Province/Territory.

- Choose the **Region** and **Community (Local)** in which you want to find sport programs, then click **Search**.

You will get list of programs that are being offered in your Local in the **Search Results** window.

- Click **Add** to the programs you wish to enroll in the **Search Results** window
(If you're a committee member/coordinator, click **ADD** to your local under the organization name column, i.e. 6C Victoria)

Search Results

Add	Details	Organization Name	Type	Program	Start Date	End Date	Schedule
Add	<input checked="" type="checkbox"/>	1A Track & Field	Community Club	Athletics	2023-09-01	2024-08-31	
Add	<input checked="" type="checkbox"/>	1A Kimberley/Cranbrook	Community				
Add	<input checked="" type="checkbox"/>	1A Active Start	Community Club	Active Start	2023-09-01	2024-08-31	
Add	<input checked="" type="checkbox"/>	1A Alpine Skiing	Community Club	Skiing - Alpine	2023-09-01	2024-08-31	
Add	<input checked="" type="checkbox"/>	1A Swimming	Community Club	Swimming	2023-09-01	2024-08-31	
Add	<input checked="" type="checkbox"/>	1A Club Fit	Community Club	Fitness	2023-09-01	2024-08-31	
Add	<input checked="" type="checkbox"/>	1A Basketball	Community Club	Basketball	2023-09-01	2024-08-31	
Add	<input checked="" type="checkbox"/>	1A Bocce	Community Club	Bocce	2023-09-01	2024-08-31	
Add	<input checked="" type="checkbox"/>	1A Bowling-5 pin	Community Club	Bowling - 5 pin	2023-09-01	2024-08-31	

<< < 1 > >> 1 - 14 of 14 items

- Choose the appropriate role from the **Organizational Role** field.
(If you do not find the role you want to have as volunteer, add a note in note field.)
- Click **Apply** to save and close this pop-up window.

Search Results

Add	Details	Organization Name	Type	Program	Start Date	End Date	Schedule
Add	<input checked="" type="checkbox"/>	1A Track & Field					
Add	<input checked="" type="checkbox"/>	1A Kimberley/Cranbrook					
Add	<input checked="" type="checkbox"/>	1A Active Start					
Add	<input checked="" type="checkbox"/>	1A Alpine Skiing					
Add	<input checked="" type="checkbox"/>	1A Swimming					
Add	<input checked="" type="checkbox"/>	1A Club Fit					
Add	<input checked="" type="checkbox"/>	1A Bocce					
Add	<input checked="" type="checkbox"/>	1A Bowling-5 pin					

Attention!

Confirmation

Please select an "Organization Role" from the list below. If you're not sure what to select, or want to volunteer for any available role, select Occasional Volunteer, and put in the Notes what you are interested in. You will be contacted by your local SO representative for more information.

Click Apply to add the enrollment to your "What You Have Selected so Far" list.

Organization Role

Program Volunteer

Notes

[Apply](#) [Cancel](#)

1 - 14 of 14 items

Your Selected Enrollments

Edit	Delete	Organization Name	Sport	Role	Enrollment Fee	Annual Fee	Total Enrollment
Edit	Delete	1A Basketball	Basketball	Program Volunteer			\$0.00

- You can see your enrollment in **Your Selected Enrollments** window (If you have selected the club by mistake, click the **Delete** button to delete this enrollment. Follow the above-mentioned steps to enroll the program you wish for.) (If you want to change your **Organization Role**, click the pencil icon to modify it and Save.)

Your Selected Enrollments

Edit	Delete	Organization Name	Sport	Role	Enrollment Fee	Annual Fee	Total Enrollment
Edit	Delete	1A Basketball	Basketball	Program Volunteer			\$0.00

[Previous Step](#) [Next Step](#)

- After reviewing your enrollment, click **Next Step**.

Step 3 – Main Information

You are required to fill out the appropriate info on this page as much as you can, including all required fields highlighted in **RED** (Gender, Language Preference, Include on Mailing List and Primary Address)

Main Information

Main Information and Address

Please confirm the following required personal information, language preferences and address.

Full Name AA Testing	Member ID 000479393
Email Testing@specialolympics.bc.ca	Your Date of Birth - MM/DD/YYYY 10/17/2000
Gender (required)	Gender Identity
Home Phone	Cell Phone
Locker ID/NCCP #	
Primary Language Preference (required)	Include on Mailing List (required)

Primary Address

Street 1 (required)	Street 2
City (required)	Province / State (required) BC
Country (required) Canada	Postal Code (required)

ADD SECONDARY ADDRESS (OPTIONAL)

Previous Step

Next Step

Then, click on **Next Step**.

Step 4 – Criminal Record

In the Criminal Record Check (CRC) Information window, click +Add to upload a copy of your police check if it meets the following criteria:

1. It has been completed within the past four years.
2. There is no criminal history on your record. If you do not have a valid CRC at this moment, click on **Next Step**. It can be uploaded later at any time after submitting your application.

CRIMINAL RECORD CHECK (CRC) INFORMATION

[+ Add](#)

Details	Delete	CRC Completed	CRC Requested	CRC Renewal
No Data Available				

100 items per page

Previous Step [Next Step](#)

Step 5 – Medical Information

Please fill out all the fields as best and clear as possible.

Once you answered **YES** for any of the medical questions, another field will appear to ask for more details related to that question.

To add any **Medical Condition**, click **+Add** to open a new pop-up window and select appropriate option and **Submit** to save it.

➔ Then click on **Next Step**

Do you have Down Syndrome? (required)

Do you have any Dietary Restrictions? (required)

Dietary Restrictions (required)

Do you have any Seizures? (required)

Do you have any Allergies? (required)

Allergy Detail

How do you treat your allergies?

Do you take any Medications? (required)

Other Health Devices

Step 6 – Emergency Contacts

You must provide at least **one** emergency contact.

➔ Add emergency contact information and click **Next Step**.

Emergency Contacts

Important
Please fill in the Emergency Contact fields marked as "required".

PRIMARY EMERGENCY CONTACT

First Name *(required)* Last Name *(required)* Relationship *(required)*

Primary Phone *(required)* Primary Email

SECONDARY EMERGENCY CONTACT

First Name Last Name Relationship

Primary Phone Primary Email

ADD ADDITIONAL CONTACT (OPTIONAL)

[Previous Step](#) [Next Step](#)

Step 7 – Member Training

You can choose to provide the courses and member trainings you have taken.

➔ Click **+Add** to add info

Member Training

Important Information
Please add training courses you have taken, such as First Aid, CPR, Safe Sport, Respect in Sport. These can be added later as well.

 [+Add](#)

Details	Training Course	Other Course	Certificate #	Date Completed	Renewal Date
No Data Available					

<< < 0 > >> 100 items per page No items to display

- ➔ If course name is not in the list, select **Other Course**. The “**Other Course**” field will appear to ask for the specific course name.
- ➔ Add the course completion date (and renewal date if applicable), then click **Submit** and **Next Step**.

Member Training

Special Olympics
Olympiques spéciaux
Canada

Training Course (required)
Safe Sport

Training Sub Course

Is Certified

Date Completed

Certificate #

Renewal Date

Submit

Step 8 – Volunteer Additional Information

Fill out the required fields in **Profile Additional Information**.

You **MUST** provide **two** referees in the Personal References section.

- ➔ Click **Add** to enter the information.

Important Information
You must provide two references who are not related to you for your application to be processed.

PERSONAL REFERENCES

Add

Details	Delete	First Name	Last Name	Relationship to Applicant	Primary Phone	Email
		Test	Reference	Employer	416-789-7899	test@tve.com

<< < 1 > >> 100 items per page 1 - 1 of 1 items

Previous Step **Next Step**

- ➔ In **My Volunteer Reference** window, provide information as required then click **Submit** to save this info.



First Name <small>(required)</small>	Cell Phone
<input type="text" value="Test"/>	<input type="text"/>
Last Name <small>(required)</small>	Primary Phone <small>(required)</small>
<input type="text" value="Reference"/>	<input type="text" value="416-789-7899"/>
Relationship to Applicant <small>(required)</small>	Secondary Phone
<input type="text" value="Employer"/>	<input type="text"/>
Employer and Position	Email
<input type="text"/>	<input type="text" value="test@live.com"/>
<input type="button" value="Submit"/>	

➔ Profile Additional Information. These are not required fields, but any additional information is helpful for SOBC.

Profile Additional Information

Additional information or details for the volunteer, or feel free to skip.

Profile Name	Why did you want to join Special Olympics?
<input type="text" value="AA Tester"/>	<input type="text"/>
Shirt Size	Are you a Healthcare Professional?
<input type="text"/>	<input type="text" value="No"/>
Is Educator	How long do you plan to volunteer with Special Olympics?
<input type="text" value="No"/>	<input type="text"/>
Volunteer Notes	
<input type="text"/>	
Short Biography	
<input type="text"/>	
<input type="button" value="Previous Step"/>	<input type="button" value="Next Step"/>

➔ Click **Next Step**.

Step 9 – Enrollment Details & Agreements

This is where you can review the enrollments you have selected at the beginning. (If you want to change **Organization Role**, click the pencil icon to modify it and click **Submit** to save.)



Enrollment Details

If there is a cost for your enrollment, payments are collected manually by your local Special Olympics volunteer or your Provincial/Territorial Chapter office.

Please Confirm Enrollment Details

Club / School Program	Community / School	Category	Organization Role	Region / District	Enrollment Fee	Processing Fee	Total Enrollment	Enrollment Paid
1A Basketball	1A Kimberley/Cranbrook	Program	Program Volunteer	1 Kootenays			\$0.00	No

➔ If everything looks good, please answer the **Agreements** to finalize.

AGREEMENTS

Please see full [Terms and Conditions](#) document for details of the question(s) below

Has the person who is being registered on this application form ever been charged/convicted of any Criminal Offence as outlined in the Terms and Conditions? (required)

Media Release (required)

I allow Special Olympics to use my/their picture, words or voice in promotional media

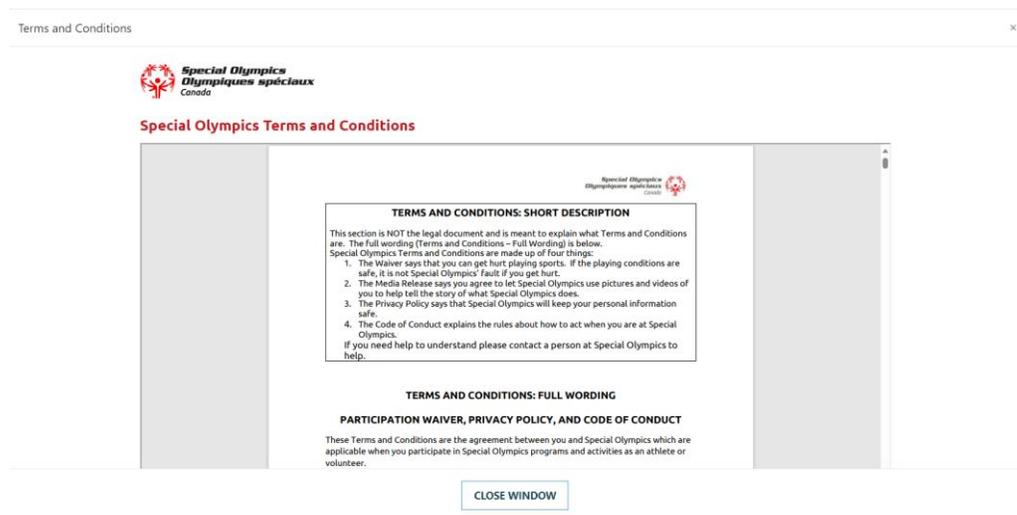
Important

By clicking on **Confirm and Submit**, you confirm and agree with the Terms and Conditions

Previous Step

Confirm and Submit

You need to click on **Terms and Conditions** link to go to the full document page. After you have read the Terms and Conditions document, Click **CLOSE WINDOW** and select your answer.



➔ Click **Confirm and Submit**. (By clicking on **Confirm and Submit**, you confirm and agree with the Terms and Conditions)

Step 10 – 100%

Congratulations!



Français A+ -A

HOME MY OPTIONS LOGOUT

HOME SELF PROGRAM FINAL CONFIRMATION

Success! Application Submitted

Thank you! A confirmation from Special Olympics has been sent to the email address you provided.

Your opinions matter to us, and we want to hear from you!

Please take a few minutes to complete our [survey](#), and enter our draw for one of 10 \$20 Tim Horton's gift cards.

Log Out

See Enrollments

This page shows that your application has been submitted successfully and you will also receive a confirmation email from the system as a reference.

SOBC Chapter and your local will review your application and might contact you for further information. Please also note that your references will also be contacted by community/club admin during the approval process.

Now you can either **Logout** or click on **My Options** to update/review your application information.

How to Review and Update the profile and enrollments

After login to the portal, hover your mouse cursor over “My Options”

- ➔ Click “My Profile” to update your personal information
- ➔ Click “My Enrollments” to review the status of your enrollments.

The screenshot shows the Special Olympics Canada portal interface. At the top left is the logo. At the top right, there are links for 'HOME', 'MY OPTIONS' (highlighted with a yellow box), and 'LOGOUT'. Below the logo, the breadcrumb 'HOME > MY ENROLLMENTS' is visible. The main content area shows a form with 'Full Name' (AA Tester) and 'Membership Status' (New). Below this is a section titled 'My Enrollments' with a table. The table has columns for Details, Start Date, Role, Status, Club / School Program, and Community / School. One enrollment is listed: Start Date 2023-09-01, Role Program Volunteer, Status Submitted, Club / School Program 1A Basketball, and Community / School 1A Kimberley/Cranbrook. On the right side, a dropdown menu is open under 'MY OPTIONS', with 'MY ENROLLMENTS' highlighted by a yellow box. Other options in the menu include MY PROFILE, MY CLUBS AND SCHEDULE, MY COMMITTEES, MY ROLES, MY PAYMENT INFO, MY BALANCE, ADD ME AS ATHLETE, ADD ME AS VOLUNTEER, and CHANGE PASSWORD.

Details	Start Date	Role	Status	Club / School Program	Community / School
	2023-09-01	Program Volunteer	Submitted	1A Basketball	1A Kimberley/Cranbrook

CONTACTS FOR SUPPORT AND QUESTIONS

Questions regarding the programs and registration, please contact your local coordinator or registration coordinator.