Dear Northern Oklahoma College Student Athlete:

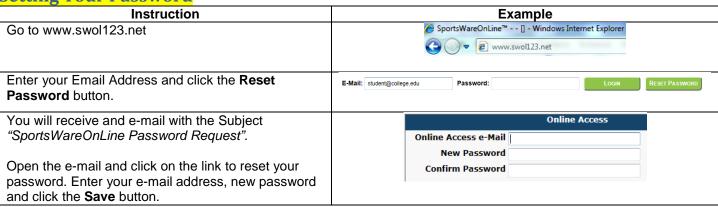
continue to SportsWareOnLine.

Prior to participating on a team from Northern Oklahoma College athletes must provide the Athletic Department with current address, emergency contact, insurance, medical alert and health history information. To expedite this process Northern Oklahoma College uses an online data entry system.

To enter your information, visit <u>www.swol123.net</u>. The first time you visit the website you will need to click on **Join SportsWare**. You will then need to enter the school ID: **Northern15**.

oining SportsWareOnLine Instruction Example SportsWareOnLine™ - - [] - Windows Internet Explorer Go to www.swol123.net. ▼ Ø www.swol123.net 'Reset Password' button. Scroll to the middle of the screen and click the Join SportsWare button. Enter your School ID. (-) (a) https://www.swoll.23.net/[5](hpj4+354td)pv2Qq2bife22]|/Athlete_ P = (a) □ (b) × (b) SportsWareOnLine™ -- [] School ID is CSMi _{SPORTSWARE™} Northern15 Please input your information to join SportsWare (ID you received from the Athletics Department) Copyright 2012 by Computer Sp Enter your **LEGAL** First Name, Last Name, Email address and click the Send button. CSMi SPORTSWARETH Home Page > Join SportsWare Please input your information to join SportsWare Athlete's First Name Athlete's Last Name Email (If athlete is a minor you can use a parent's e-mail address) (Select your school/college) © Copyright 2012 by Computer Sports Medicine, Inc. Your request to join SportsWare Message from webpage will then be sent to the Athletic Trainer for review. Your information has been saved. You will receive an e-mail when your request has been accepted by the school OK Once your request is accepted Subject you will receive an e-mail with the Subject "SportsWare request accepted". Open the e-mail and click the www.swol123.net link to

Setting Your Password



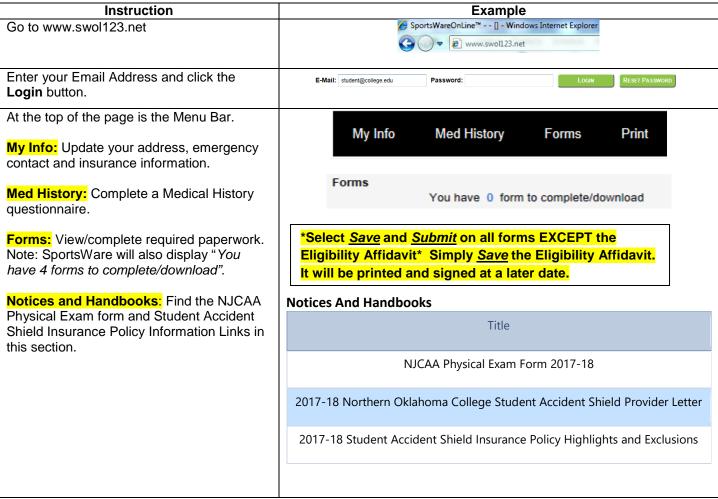
Updating Your Information

Things you will need to have in order to properly complete the forms:

- 1. Up to date addresses and phone numbers for yourself, parents/guardians, emergency contacts.
- 2. A digital copy of both the front and back of your insurance card(s), health, dental, vision if applicable.

 The copy must be saved to the device you are completing these forms on in order to upload it.

 **NOTE: you can upload additional copies of cards by choosing "ADD" under the "FORMS" tab.
- 3. Immunization record (dates).



Thank you for your prompt help. If you have any questions, please contact the athletic training office for assistance. Sincerely,

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