New Athlete ATS INSTRUCTIONS

If you are having trouble please contact Seth Wolles: seth.wolles@nwciowa.edu

- 1. Go to <u>nwciowa2.atsusers.com</u>
- 2. Athlete ID= new
- 3. Password = new
- 4. Fill out your information (highlighted boxes are required)
 - a. Select Northwestern College
 - b. Select your sport as team #1 (if playing multiple sports select sport that competes first as team #1)
 - c. Select any additional sports you are participating in for teams 2 and 3
 - d. IMPORTANT:

<mark>Your Athle</mark>	te ID must be your NWC ID#	
Athlete ID:		
Used to log	nto the ATS Athlete Portal and Kiesk.	NWC ID # Goes H

- e. Choose whatever password you want but make sure you are able to remember it for this fall!
- 5. Make sure you add any Medical Alerts, Allergies, or Current Medications you have. Select from the dropdown box. If not listed then type in the large white box.

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Jlergies (Size limit 200)	
urrent Medications (Size limit 200)	

6. Click Save Athlete Information



(instructions continue on next page)

7. Click on the Medical History Tab

General Medical Histor, Insurance Contacts Athlete Forms eFiles

8. Click new to add any surgeries



9. Answer all yes/no questions

Medical Questions For new profiles you must answer Yes or No. Please read all questions and click Yes or No to those that apply.			
Question	Applies	Family	Other Information
Do you have Asthma?	• Yes 🔾 No		
Have you developed diabetes?	O Yes 🔍 No		
Have you developed epilepsy/convulsions?	O Yes 🖲 No		

10. Click Save Medical History

Save Medical History

11. Click on the Insurance Tab General Medical History Insurance Contacts Athlete Forms eFiles

12. Click Add to complete insurance information

Insurance:
Add
Refresh

a. If your Insurance company is not listed click Add New Insurance Company

Add a New Insurance Company

- b. Make sure to enter your parents info also if they are the policy holder
- 13. Click Check Mark



14. Click Contacts Tab General Medical History Insurance Contacts Athlete Forms eFiles 15. Click Add to create Emergency Contacts **Emergency Contacts:** €Add 🐻 Delete 🛛 🔄 Refresh a. Fill out information 16. Click Check Mark 17. Click Athlete Forms Tab eFiles General Medical History Insurance Contacts Athlete Forms 18. Select NWC Insurance Policy from pull down tab Form Name: ۲ 19. Click New Form Name: NWC Insurance Policy ۲ New Print/View • Date: Select Date 20. Complete ALL questions 21. Click Save Save iew 22. Select Injury and Illness Reporting Acknowledgement Form Name: ٧ 23. Click New Form Name: Injury and Illness Reporting Acknowledger • New Print/View Select Date Date: v

24. Complete ALL questions

25. Click Save



26. FOOTBALL PLAYERS ONLY*** Select Football Helmet

Form Name:	T	4	

27. Click New

Form Name:	Football Helmet		Ŧ	New	e e	Print/View
Date:	Select Date	T				

- 28. Complete ALL questions
- 29. Click Save



30. ALL ATHLETES*** Select Physical Form

	Form Name:	
31.	Click New	
	Form Name:	Physical Form New Print/View Print/View
	Date:	Select Date

- 32. Complete ALL questions (3 PAGES)
- 33. Click Save



35. Click Print



- 37. Bring Physical Form to Doctors office when you are completing your physical to have them sign.
- 38. Once all information is completed log out

