

September 9, 2020

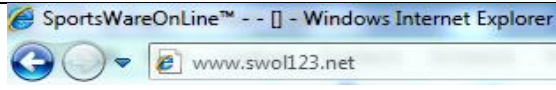

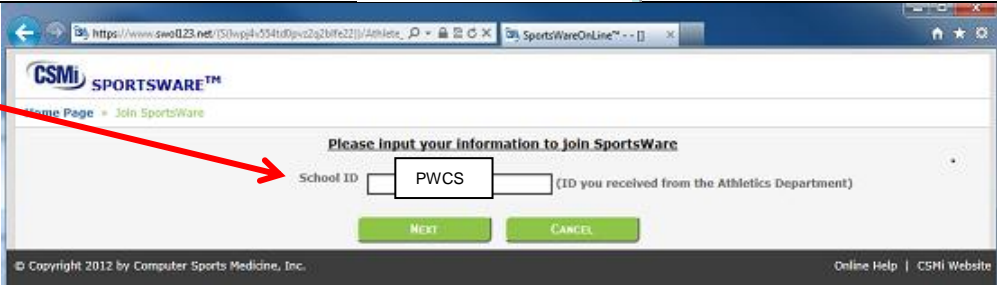
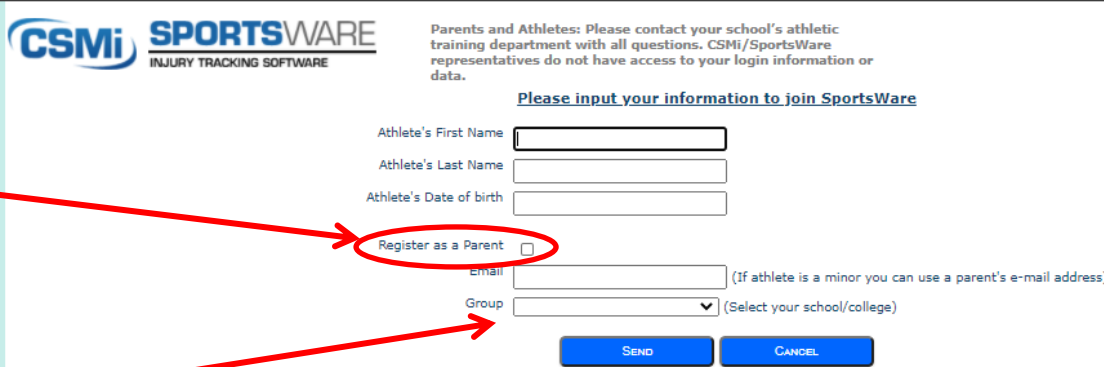
Dear Parent/Guardian/Student:

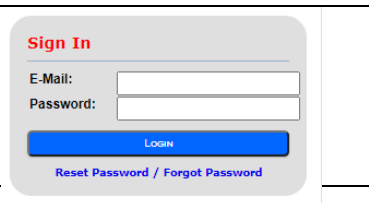
Prior to participating on a team at a Prince William County High School, athletes are asked to provide the Athletic Department with current address, emergency contact, medical alert and health history information. To expedite this process PWCS uses an electronic medical records system called SportsWare.

This page is an access point to the PWCS Athletic Training athlete database. Please read and follow the instructions.

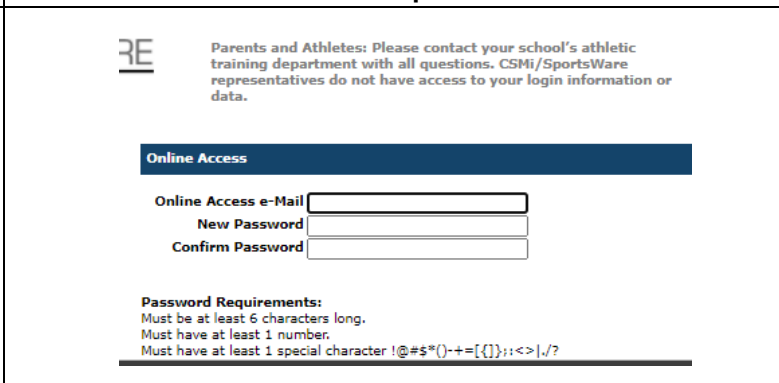
To enter your information, visit www.swol123.net. The first time you visit the website you will need to enter your personal email address, on file with the school, and click **Get Password**.

Joining SportsWare OnLine (DO NOT SIGN UP MULTIPLE TIMES)


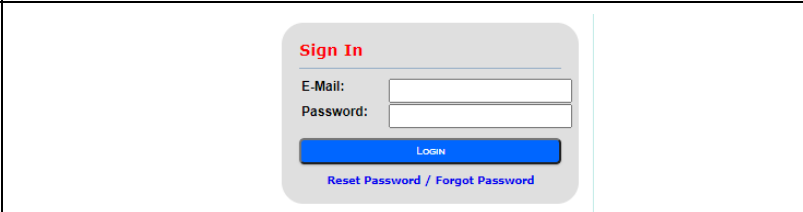
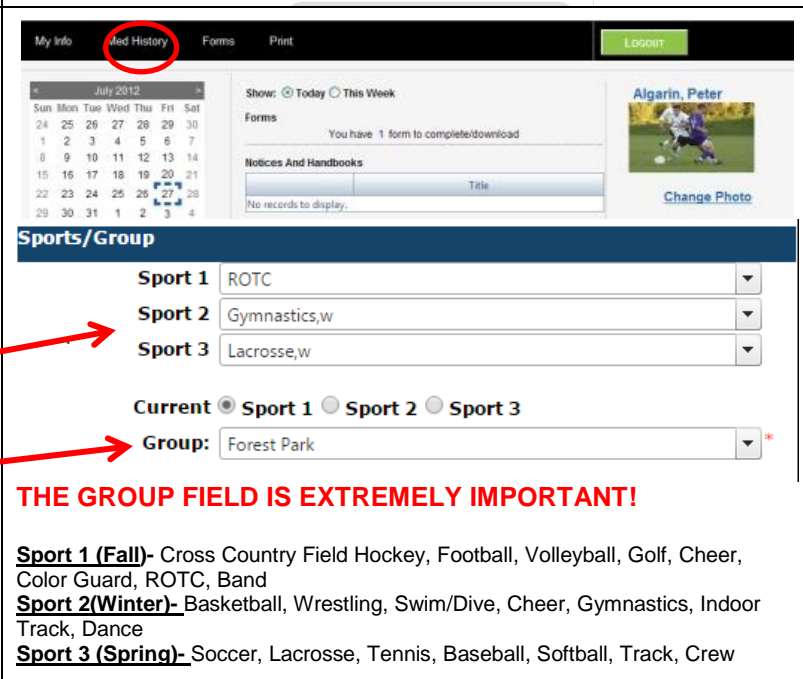
Instruction	Example
Go to www.swol123.net	
Scroll to the middle of the screen and click the Join SportsWare button.	
Enter the School ID PWCS <i>This is required to join the correct school.</i>	
Enter your First Name, Last Name, Date of Birth, Email address, Group (school) and click the Send button. Please check the box, if you are registering as a parent. Please select a school name for the Group, not one that says "XYZ Coach" or "Unity Reed"	

<p>You will receive and e-mail with the Subject "SportsWare request accepted".</p>	<p>Use the link in the acceptance email. Enter you email address, then click Reset Password. Another email will be generated.</p>	
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Setting Your Password

Instruction	Example
<p>You will receive and e-mail with the password reset link</p> <p>Open the e-mail and click on the link to reset your password.</p> <p>Enter your e-mail address, new password and click the Save button.</p>	

Updating Your Information

Instruction	Example
<p>Go to www.swol123.net</p>	
<p>Enter your Email Address and password, then click the Login button.</p>	
<p>At the top of the page is the Menu Bar. Click on My Info</p> <p>My Info: General Tab: Add the sports you are playing (Sport 1- Fall, Sport 2-Winter, Sport 3- Spring). Group: Please select the appropriate school.</p> <p>Please select a school name for the Group, not one that says "XYZ Coach" or "Unity Reed."</p>	 <p>THE GROUP FIELD IS EXTREMELY IMPORTANT!</p> <p>Sport 1 (Fall)- Cross Country Field Hockey, Football, Volleyball, Golf, Cheer, Color Guard, ROTC, Band Sport 2(Winter)- Basketball, Wrestling, Swim/Dive, Cheer, Gymnastics, Indoor Track, Dance Sport 3 (Spring)- Soccer, Lacrosse, Tennis, Baseball, Softball, Track, Crew</p>

Update the *Address, Emergency* Tab with correct information:

AddressTab:

Your primary address is your permanent address.

Secondary address is your school address.

Emergency Tab:

Enter at least one primary emergency contact. This will be used when putting together emergency cards.

Insurance Tab: OPTIONAL

Please upload a scanned copy (front and back) of your insurance card. This can be done at the bottom of the page.

Add Alerts to the Medical Tab

Put any medical conditions (ie diabetes, asthma, allergies, epilepsy or other) that you may have.

Put any allergies to medications that a physician or EMS would need to know.

You do not need to complete the immunizations.

Med History: Complete a Medical History questionnaire.

Complete 'MedHistory' **YEARLY**

Answer Yes or No to **EACH** question. ★

Explain all YES answers in the comment box.

If you have filled this out previously please review and update as needed.

Click "Save"

Forms: View/complete required paperwork. Note: SportsWare will also display "You have 1 forms to complete/download". The VHSL Physical form is located here for you to download.

You MUST turn in a hard copy of your physical and concussion training to your school, even after you upload a digital copy. The digital copy is just an additional method of safe storage.

Title	Date Uploaded	Required	Obsolete	Signed By	Date Signed	Status
VHSL Physical Form 2017	6/23/2020 1:50:06 PM	<input type="checkbox"/>	<input type="checkbox"/>			NOT EDITABLE

You can upload a copy of your VHSL physical and Concussion/ COVID training certificate.

Print: Print My Info and Medical History data for your own records, if you wish.

Item	Yes/No	Comment
Previous Concussion date	YES	Explain YES answers
Asthma		
Allergic to Foods, Insects, Pollen		
Ongoing or Chronic Illness		
Diabetes		
Sickle Cell Anemia		
Allergic to medications		
Have you had surgery? For what?		
Hives, Rash		
Hepatitis		
Epilepsy		

Thank you for your prompt help. The information you entered is not shared outside of your individual school. The certified athletic trainer is the **only** person who has access to your medical information. The emergency contact information can be accessed by the athlete's coach during their respective season only. SportsWare is fully HIPPA compliant.

If you have any questions, please contact your school's athletic office, Kelly Gardner, Supervisor of Student Activities, or the PWCS SportsWare liaisons Jessie Shanks shanksjl@pwcs.edu or Ashley Ausborn ausbora@pwcs.edu

Sincerely,

Prince William County Schools