

**SPECIAL OLYMPICS IOWA
AKRON UNIFIED GOLF TOURNAMENT REGISTRATION FORM
ONLY 9-HOLE OFFERED**

Please complete the registration form below and submit to the State Office.

PLEASE NOTE: All athletes must have a current physical on file at the State Office in order to compete.

GROUP/FACILITY/INDIVIDUAL: _____

CONTACT NAME: _____ PHONE: _____

ADDRESS: _____ CITY/STATE: _____ ZIP: _____

E-MAIL ADDRESS: _____

| ATHLETE NAME | SHIRT SIZE | DOB | HAVE CLUBS? | UNIFIED PARTNER NAME | SHIRT SIZE |
|--------------|------------|-----|-------------|----------------------|------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Please note: If there is not a Unified Partner name filled in, the athlete will receive a partner on the day of the tournament.
Please send registration materials to the State Office at registrations@soiowa.org or
Special Olympics Iowa, 551 SE Dovetail Rd, PO Box 620, Grimes, IA 50111. Please call Bryan Coffey with questions at 515-986-5520.