



## DELEGATION MANAGER FORM

Each delegation of Special Olympics Iowa will designate a Delegation Manager. The primary role of the Delegation Manager is to serve as a liaison between the delegation, Area Director and State Office. Responsibilities of the Delegation Manager include providing ongoing communication with the Area Director, State Office, delegation volunteers including coaches, chaperones, athletes and athlete families and/or staff, submitting registration forms including entry forms to the Area Director and State Office and distributing Class A credentials to delegation members.

Delegation Name – City/Delegation Name or Last Name (Example: Grimes Dream Rollers or Grimes Brown)

Delegation Name \_\_\_\_\_

Delegation Manager Name (please only list one name) \_\_\_\_\_

E-mail address \_\_\_\_\_ Telephone \_\_\_\_\_ Home \_\_\_ or Cell \_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Home \_\_\_ or Facility \_\_\_

List the age range of athletes who are eligible to train and compete with your delegation \_\_\_\_\_

Are you accepting new athletes into your delegation at this time? \_\_\_ Yes \_\_\_ No

Check the sports and/or Special Programs your delegation currently offers training and competition opportunities.

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Alpine Skiing     | <input type="checkbox"/> Athletics (Track & Field) | <input type="checkbox"/> Basketball           |
| <input type="checkbox"/> Basketball Skills | <input type="checkbox"/> Bocce                     | <input type="checkbox"/> Bowling              |
| <input type="checkbox"/> Challenge Day     | <input type="checkbox"/> Cheerleading              | <input type="checkbox"/> Cross Country Skiing |
| <input type="checkbox"/> Cycling           | <input type="checkbox"/> Equestrian                | <input type="checkbox"/> Figure Skating       |
| <input type="checkbox"/> Flag Football     | <input type="checkbox"/> Golf                      | <input type="checkbox"/> Gymnastics           |
| <input type="checkbox"/> Powerlifting      | <input type="checkbox"/> Roller Skating            | <input type="checkbox"/> Snowshoeing          |
| <input type="checkbox"/> Soccer            | <input type="checkbox"/> Softball                  | <input type="checkbox"/> Speed Skating        |
| <input type="checkbox"/> Swimming          | <input type="checkbox"/> Tennis                    | <input type="checkbox"/> Unified Sports       |
| <input type="checkbox"/> Volleyball        | <input type="checkbox"/> Young Athlete Play Day    |   |

Does your delegation have any plans to begin offering training and competition opportunities in any new sports, including Unified Sports? \_\_\_ Yes \_\_\_ No

If yes, please indicate what sports will be offered:

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Please complete and submit the completed Delegation Manager Form to [classa@soiowa.org](mailto:classa@soiowa.org) or the State Office.