

Special Olympics Iowa Gymnastics Entry Form

Delegation Name (local program) _____ Area (North, East, etc.) _____

Gymnastics Head Coach _____ E-mail Address _____

Cell Phone Number _____ and / or Other Phone Number _____

Athlete is competing in _____ Rhythmic Gymnastics _____ Artistic Gymnastics Total # of Coaches/Chaperones/1:1 Staff _____

Athletes may only register for three events within a category (artistic or rhythmic).

Please put a check mark in the column of the events in which you want to register your athletes.

Athlete's Name	Gender	D.O.B.	Level A, I, II, III or IV	Artistic Events									Rhythmic Events				
				Beam	Floor	Vault	Single Bar	Uneven Bars	Horizontal Bar	Pommel Horse	Rings	Parallel Bars	Hoop	Ribbon	Ball	Rope	

- Notes:**
1. Please place an X in the box under the event to indicate in which events the athlete will compete.
 2. Current Compulsory Routines, Rules and Judging Sheets can be found for each sport at:
 - Artistic Gymnastics can be found at <http://www.specialolympics.org/Artistic-Gymnastics.aspx>
 - Rhythmic Gymnastics can be found at <http://www.specialolympics.org/rhythmic-gymnastics.aspx>
 3. No skill assessment video required. Athletes will be divisioned by the level indicated on this entry form and by age where appropriate.
 4. D.O.B. – Date of Birth (MM/DD/YY)

*Please send all registration materials to registrations@soiowa.org or to Special Olympics Iowa, 551 SE Dovetail Road, Grimes, IA 50111.