

Volunteer Registration Form

Listed below are the volunteer opportunities for Challenge Day. Please fill out this form and return it to: registrations@soiowa.org or fax to 515-986-5530. Please help make this day successful for our Special Olympic Athletes!

You <u>don't have to have prior knowledge</u> of any of the events to be a volunteer. We'll instruct you on whatever you choose to do. *Number your job choices 1, 2, and 3*

	5 – 9:15 AM: Volunteer Regunch is provided for all volu	-
Bocce Ramp Bowling Race Walk Golf Ball Darts Shot Put Batting Basketball Shoot	Lu R	eam Volleyball eam Basketball unch egistration hotographer
participating in a need to commi	partner with an athlete for the all of the day's events. As a j it for the entire day.	day. You will work as a team partner to an athlete, <u>you will</u> BIRTHDATE
		ZIP:
DAY PHONE:	E-Mail Address	Gender Female Male
3x-Large 4x-Lar	I 🗌 Medium 🗌 Larg ge Youth Size paghetti, applesauce, pudd	
	vmpics Iowa ail Road, P.O. Box 620 wa 50111	This is a day of fun for our athletes and our volunteers!
	strations@soiowa.org	Fax: 515-986-5530