

**SPECIAL OLYMPICS IOWA
SOUTHWEST UNIFIED SPORTS TRAINING DAY REGISTRATION FORM
TUESDAY, NOVEMBER 12th 2019**

Please complete the registration form below and submit to the State Office no later than: Friday, November 1st 2019

PLEASE NOTE: All athletes must have a participant release form on file at the State Office in order to participate.

GROUP/FACILITY/INDIVIDUAL: _____

CONTACT NAME: _____ PHONE: _____

ADDRESS: _____ CITY/STATE: _____ ZIP: _____

E-MAIL ADDRESS: _____

| | | Choose one of these three tracks | | | |
|--------------|-----|---|-------------------------|--------------|-----------------------|
| ATHLETE NAME | DOB | BASKETBALL SKILLS | DEVELOPMENTAL DRIBBLING | CHEERLEADING | WILL EAT SCHOOL LUNCH |
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Number of coaches who will attend training:

Basketball Skills _____ Cheerleading _____

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