2020 Winter Games Handbook

Alpine Skiing
Cross Country Skiing
Figure Skating
Snow Shoeing
Speed Skating
On behalf of the volunteers of the Games Organizing Committee and state office staff, welcome to the 2020 Special Olympics Iowa Winter Games. We look forward to an exciting and memorable competition for the over 300 athletes and Unified Sports partners, coaches, chaperones, family members and volunteers coming to the Dubuque area for competition in alpine skiing, cross country skiing, figure skating, snow shoeing and speed skating.

This handbook is designed to provide you with the information necessary to best manage your participation in the Winter Games. Please review the information in great detail and share the handbook with members of your delegation as well as family members attending the event. Please contact me at 515-986-5520 or rschwarzkopf@soiowa.org if you have any questions.

Thank you for your assistance. We look forward to seeing you at the 2020 Special Olympics Iowa Winter Games.

Sincerely,

Rhonda Schwarzkopf

Director of Sports and Advanced Competitions
Special Olympics Iowa
## 2020 Special Olympics Iowa Winter Games Schedule of Events

### Monday, 01/13/2020

<table>
<thead>
<tr>
<th>Time</th>
<th>Albrecht Acres Snowshoeing</th>
<th>Mystique Community Ice Center Figure &amp; Speed Skating</th>
<th>Sundown Mountain Alpine &amp; Cross Country Skiing</th>
</tr>
</thead>
<tbody>
<tr>
<td>10:00 am</td>
<td>Registration</td>
<td></td>
<td>AS &amp; CC Registration &amp; Equipment Checkout</td>
</tr>
<tr>
<td>10:30 am - 11:30 am</td>
<td></td>
<td></td>
<td>Alpine Ski - Intermediate Clinic @ Intermediate Hill</td>
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<tr>
<td>10:00 am - 12:00 pm</td>
<td>Practice</td>
<td></td>
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<tr>
<td>11:00 am - 1:00 pm</td>
<td>Lunch</td>
<td>Lunch</td>
<td>Lunch</td>
</tr>
<tr>
<td>11:30 am</td>
<td>Registration</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12:00 pm – 12:45 pm</td>
<td>Figure Skating Practice</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12:30 pm</td>
<td>800 M Time Trial</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12:45 pm</td>
<td>All Other Time Trials</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1:00 pm – 3:30 pm</td>
<td>Speed Skating Preliminaries</td>
<td></td>
<td>Alpine Ski - Clinic @ Bunny Hill</td>
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<tr>
<td>1:00 pm – 3:30 pm</td>
<td></td>
<td></td>
<td>Alpine Ski - Skill Assessments &amp; Time Trials @ Beginner, Intermediate &amp; Advanced Hills</td>
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<tr>
<td>1:00 pm – 3:30 pm</td>
<td></td>
<td></td>
<td>Cross Country Ski - Skill Assessment &amp; Time Trials</td>
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<tr>
<td>2:45 pm</td>
<td>800 M Competition</td>
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<tr>
<td>5:45 pm</td>
<td>Winter Parade Line-up at the Grand Harbor Hall and Patio</td>
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<td></td>
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<tr>
<td>6:00 pm</td>
<td>Opening Ceremony outside along the Grand Harbor Patio</td>
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<tr>
<td>6:30 pm</td>
<td>Dinner in the Grand River Center Exhibit Hall B</td>
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<tr>
<td>6:30 pm – 8:00 pm</td>
<td>Souvenir sales outside of Exhibit Hall B</td>
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<tr>
<td>7:00 pm – 8:30 pm</td>
<td>Dance in the Grand River Center Exhibit Hall B</td>
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<tr>
<td>9:00 pm</td>
<td>Coaches meeting in Grand Harbor Hotel Platinum Room A</td>
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</tbody>
</table>

### Tuesday, 01/14/2020

<table>
<thead>
<tr>
<th>Time</th>
<th>400 M &amp; 200 M Competition</th>
<th>Alpine Ski - Clinic @ Bunny Hill</th>
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<tbody>
<tr>
<td>9:00 am</td>
<td></td>
<td>Alpine Ski - Slalom @ Beginner Hill</td>
</tr>
<tr>
<td>9:30 am – 11:30 am</td>
<td></td>
<td>Cross Country Ski - 500 M Competition</td>
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<tr>
<td>9:30 am - 11:30 am</td>
<td></td>
<td>Alpine Ski - Slalom @ Intermediate &amp; Advanced Hills</td>
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<tr>
<td>10:00 am – 11:30 am</td>
<td></td>
<td>Alpine Ski Clinic - 10 M Glide @ Bunny Hill</td>
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<tr>
<td>10:30 am – 10:45 am</td>
<td>Speed Skating Warm-ups</td>
<td>Cross Country Ski - 100 M Competition</td>
</tr>
<tr>
<td>10:45 am – 12:00 pm</td>
<td>Speed Skating Finals</td>
<td>Alpine Ski – Giant Slalom Competition @ Beginner, Intermediate &amp; Advanced Hills</td>
</tr>
<tr>
<td>11:00 am – 1:00 pm</td>
<td>Lunch</td>
<td>Alpine Ski – Super Glide Competition @ Beginner Hill</td>
</tr>
<tr>
<td>12:30 pm</td>
<td>100 M &amp; 4 x 100 M Relay Competition</td>
<td>Cross Country Ski - 1 K Competition</td>
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<td>1:00 pm – 2:00 pm</td>
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<td>1:00 pm – 3:00 pm</td>
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<tr>
<td>1:30 pm – 3:00 pm</td>
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<td>3:00 pm – 3:30 pm</td>
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<tr>
<td>3:00 pm – 3:30 pm</td>
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<tr>
<td>6:00 pm</td>
<td>Banquet in the Grand River Center Exhibit Hall B</td>
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<tr>
<td>5:30 pm – 7:00 pm</td>
<td>Souvenir sales outside of Exhibit Hall B</td>
<td></td>
</tr>
<tr>
<td>7:30 pm – 9:00 pm</td>
<td>Celebration party in the Grand Harbor Aquatics Center</td>
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</tbody>
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General Information & Special Events

Delegation Registration
- Delegation packets will be distributed at the sport venues starting at 10:00 am on Monday, January 13.
- All athletes and Unified Sports partners must attend the practice time at the Winter Games. Athletes competing in alpine skiing, cross country skiing, snow shoeing and speed skating must complete a time trial as well. No one is allowed to go directly to competition without practicing. Unified Sports partners must complete a time trial as well.
- All athletes must wear their designated bib number during practice, the time trials and competition.

Housing
- The Grand Harbor Resort and Waterpark located at 350 Bell Street in Dubuque is the SOIA Winter Games headquarters. Housing, the Opening Ceremony, celebration dances and coaches’ meeting will be held at the Grand Harbor.
  - **Hotel registration at the Grand Harbor will be by delegation name, not by individual name.**
- Special Olympics Iowa will only pay for rooms for delegations that completed the appropriate housing form.
- Any phone calls, move rental, room service food and drink and incidentals are the responsibility of the delegation assigned to the room.

Meals
- Lunch will be served at the sport venues on Monday, January 13 and Tuesday, January 14 for delegations that requested lunches on the Winter Games registration form. Tentative meals are listed below.
  - Monday: Beef hotdogs, chips, cookie, Fruity Snack, water and hot chocolate
  - Tuesday: Sloppy Joes, chips, cookie, Fruity Snack, water and hot chocolate
- Breakfast will be served at the Grand Harbor Resort Exhibit Hall B on January 14 for delegations that requested breakfast on the Winter Games registration form. The tentative meal is listed below.
  - Tuesday: Scrambled eggs, sausage, pancakes, melon, orange juice, milk and coffee
- A free continental breakfast will be offered on the second floor of the Grand Harbor Resort on January 15 for all delegation members staying at the hotel.
- Dinner will be served at the Grand Harbor Resort Exhibit Hall B on January 13 and 14 for delegations that requested dinner on the Winter Games registration form. Tentative meals are listed below.
  - Monday: Salad, pizza, chicken nuggets, vegetable, lemonade and coffee
  - Tuesday: Salad, meatloaf, mashed potatoes, corn, roll, cake, lemonade and coffee

Souvenirs
- Souvenirs will be sold outside of Exhibit Hall B. Souvenir sale times are listed below.
  - Monday: 6:30 pm – 8:00 pm
  - Tuesday: 5:30 pm – 7:00 pm

Medical Coverage
- Alpine Skiing and Cross Country Skiing: Ski Patrol at Sundown Mountain.
- Figure Skating, Snow Shoeing and Speed Skating: 911 or on-site ambulance service if available.

Opening Ceremony
- Will be held outside along the Grand Harbor patio unless there is inclement weather.
- Delegations will line up near the back entrance to the patio on the second floor of the hotel. Delegations will walk along the River Walk to the River Center patio.

Lost and Found
- Lost and Found will be located at Delegation/Athlete Registration at each sport venue and in the Grand Harbor Resort Exhibit Hall B.
Sport Information

Sport Rules
- All Special Olympics Iowa competitions shall be conducted in accordance with the Official Special Olympics Sports Rules and corresponding national governing bodies. Any rule protests will be handled by the Venue Directors.

Competition Age Groups and Divisioning
- Special Olympics Iowa follows the guidelines provided by Special Olympics Incorporated for divisioning competition at the Winter Games. In order to provide meaningful, quality competition opportunities for our athletes and Unified Sports partners, we combine where necessary in all Winter Games sports. Our guidelines for divisioning state that ability should be the primary consideration for divisioning.
- **Athletes cannot change any events or alpine ski hills during the Winter Games.**

Equipment
- Athletes and Unified Sports partners are to bring their own sport equipment and Special Olympics approved alpine ski helmets. Delegations are to ensure that all equipment they bring is safe and in proper working order.

Clothing
- Athletes and Unified Sports partners are to wear appropriate winter wear including coats, snow pants, snow boots, hats, gloves and mittens.

Award Presentations
- Awards will be given out following the completion of a division.

Inclement Weather
- In case of extreme weather conditions, some events may be modified, shortened or cancelled for safety reasons.

Coach Responsibilities
- Coaches attending the Winter Games are asked to accept and carry out the following responsibilities:
  - Provide for the general welfare, safety, health and well-being of each Special Olympics athlete and Unified Sport partner in their charge.
  - Familiarize themselves with the information in this handbook.
  - Provide supervision for athletes and Unified Sports partners as necessary.
  - Ensure that athletes and Unified Sports partners report to competition venues on time.
  - Provide assistance to athletes and Unified Sports partners in getting to meals at appointed times.
  - Ensure that medical and prescribed medications protocols are followed.
  - Ensure that athletes and Unified Sports partners are properly attired for competition & special events.
  - Report all emergencies to appropriate authorities after taking immediate action to ensure the health and safety of participants.
  - Be courteous and professional in all dealings with volunteers.
  - Carry a copy of the athlete’s medical release.

SOIA Staff Contact
- Rhonda Schwarzkopf; Director of Sports: 515-418-2283
- Dawn Criss, Alpine Ski: 641-442-5874
- Bryan Coffey, Cross Country Ski: 641-203-2316
- Katie Schrodt, Ice Skating: 515-745-2887
- Sally Briggs, Snow Shoeing: 319-321-6765
Competition Information

Alpine Skiing
- Delegations will report to Mountain Center at Sundown Mountain Resort located at 16991 Asbury Road in Dubuque. Registration, check-in, awards and lunch for alpine ski athletes, coaches and chaperones will be held at the Mountain Center.
- Review the Sundown Mountain Resort alpine ski trail map for the location of each hill.
- Review the “Special Olympics Alpine Ski Helmet Requirements and Guidelines” list to ensure that every athlete has their own ski helmet that meets the requirements listed. Alpine ski helmets will not be provided by Special Olympics Iowa or Sundown Mountain Resort.
- Athletes not bringing their own equipment, excluding helmets, will be fitted with the appropriate equipment. All equipment is to be returned to the checkout area at the end of the day.
- Slalom and Giant Slalom races consist of two timed runs. The combined times of each run will determine the results for awards.
- Ski lift tickets for coaches who must be one the ski areas to assist athletes are $20 each.
- Family members and chaperones who wish to ski must purchase their own lift tickets, at regular price, from Sundown Mountain Resort.

Cross Country Skiing
- Delegations will report to the South Lodge at Sundown Mountain Resort located at 16991 Asbury Road in Dubuque. Registration, check-in, awards and lunch for cross country ski athletes, coaches and chaperones will be held at the South Lodge.
- Athletes not bringing their own equipment will be fitted with the appropriate equipment. All equipment is to be returned to the checkout area at the end of the day.
- Coaches will sign for their athlete’s skis as they are checked in and out each time. Skis will not be handed out without a completed “Cross Country Ski Check-Out Card.”

Figure Skating
- Delegations will report to Mystique Community Ice Center located at 1800 Admiral Sheehy Drive in Dubuque. Registration, check-in, awards and lunch for figure skating athletes, coaches and chaperones will be held at Mystique Community Ice Center.

Snow Shoeing
- Delegations will report to Camp Albrecht Acres located at 14837 Sherrill Road in Sherill. Registration, check-in, awards and lunch for snow shoe athletes, coaches and chaperones will be at Camp Albrecht Acres.
- Athletes and Unified Sports partners are to bring their own snow shoes for practice, time trials and competition. Delegations are not to rely on other delegations or Special Olympics Iowa to provide snow shoes. Snow shoes provided by other delegations will be first used by athletes and Unified Sports partners within their own delegation. If the snowshoes are not being used by these athletes and Unified Sports partners, only then will they be available for other competitors. Therefore delegations should provide their own snow shoes to ensure that their athletes and Unified Sports partners are fitted appropriately and that the snow shoes will be available for competition.
- Snow boots must be worn during practice, time trials and competition.

Speed Skating
- Delegations will report to Mystique Community Ice Center located at 1800 Admiral Sheehy Drive in Dubuque. Registration, check-in, awards and lunch for figure skating athletes, coaches and chaperones will be held at Mystique Community Ice Center.
- Athletes not bringing their own equipment will be fitted with the appropriate equipment. All equipment is to be returned to the checkout area at the end of the day.
I, the Participant in Special Olympics at Sundown Mountain or parent or legal guardian of a Participant, know, understand and agree that skiing and snowboarding involve both known and unknown risks, dangers, and hazards.

Signing on my own behalf, I agree as a condition of being allowed to use the ski area facility and premises that I freely accept and voluntarily assume all risks of personal injury, death, or property damage, AND I RELEASE, INDEMNIFY AND HOLD HARMLESS SUNDOWN MOUNTAIN AND ITS AGENTS, EMPLOYEES, VOLUNTEERS, DIRECTORS, OFFICERS AND SHAREHOLDERS FROM ANY AND ALL LIABILITY WHICH RESULTS IN ANY WAY FROM ITS ALLEGED NEGLIGENCE OR FAULT, CONDITIONS ON OR ABOUT THE PREMISES AND FACILITIES, THE OPERATIONS OF THE SKI AREA (INCLUDING, BUT NOT LIMITED TO, GROOMING, SNOW MAKING, SKI LIFT OPERATIONS, SKI PATROL OPERATIONS, ACTIONS OR OMISSIONS OF EMPLOYEES, VOLUNTEERS, OR AGENTS OF THE AREA), OR MY PARTICIPATION IN SKIING/SNOWBOARDING/RIDING OR OTHER ACTIVITIES AT THE AREA, ACCEPTING FOR MYSELF THE FULL RESPONSIBILITY AND LIABILITY FOR ANY AND ALL DAMAGE OR INJURY OF ANY KIND WHICH MAY RESULT.

Signing on behalf of another (as parent or legal guardian), I agree TO DEFEND, INDEMNIFY, AND HOLD HARMLESS SUNDOWN MOUNTAIN AND ITS AGENTS, EMPLOYEES, VOLUNTEERS, DIRECTORS, OFFICERS AND SHAREHOLDERS FROM ANY AND ALL LIABILITY WHICH RESULTS IN ANY WAY FROM ITS ALLEGED NEGLIGENCE OR FAULT, CONDITIONS ON OR ABOUT THE PREMISES AND FACILITIES, THE OPERATIONS OF THE SKI AREA (INCLUDING, BUT NOT LIMITED TO, GROOMING, SNOW MAKING, SKI LIFT OPERATIONS, SKI PATROL OPERATIONS, ACTIONS OR OMISSIONS OF EMPLOYEES, VOLUNTEERS, OR AGENTS OF THE AREA), OR PARTICIPANT’S SKIING/SNOWBOARDING/RIDING OR OTHER ACTIVITIES AT THE AREA, AGREEING TO DEFEND, INDEMNIFY, AND HOLD HARMLESS SUNDOWN MOUNTAIN ON ANY CAUSE OF ACTION WHICH MAY RESULT FROM MINOR PARTICIPANT’ S USE OF THE PREMISES.

Further, I agree to visually inspect the ski trail prior to the event in which I will be participating. If I am not willing to accept the risk of injury associated with the event I will not participate.

In signing below, I certify that I have read, understand and accept this Release of Liability Agreement. I also understand this Release of Liability to be legally binding.

Delegation Name: ____________________________ Delegation Manager: ____________________________
DM Email: ____________________________ DM Telephone: ____________________________
Date: ____________________________ (Participant’s Signature)

(Please Print Participant’s Name)

(Signature of Parent or Guardian if participant is under 18 years of age)
Special Olympics Alpine Ski Helmet Requirements and Guidelines

All Special Olympics Iowa alpine ski athletes must provide their own helmets for competition at the SOIA Winter Games. All helmets must meet the following requirements:

- Bear a CE mark and conform to recognized and appropriate standards such as CEH.Din 1077, ASTM F2040, SNELL S98 or RS 98.
- Have a conformity label affixed by the manufacturer in a non-removable way, at the back of the helmet, in a position where it is not covered by the goggle strap.
- The conformity label must contain the text “Conform to FIS Specifications RH 2013.”
- Helmets must cover the head and ears.
- Helmets with spoilers or edges that stick out are not permitted.
- Protective features, such as chin guards on SL helmets are permitted.
- Soft ear protection is only permitted for helmets used in SL.
PARTICIPANT RELEASE & WAIVER

Liability Release. To be read and understood by all persons intending to do participate in Special Olympics activities at Camp Albrecht Acres. Participant does hereby release and forever discharge and hold harmless Camp Albrecht Acres from all liability claims and demands which arise from their participation in activities and events on Albrecht Acres’ grounds. The participant assumes the risk of injury or harm in the activities and releases Camp Albrecht Acres from all liability for injury, illness, death or property damage resulting from the activities.

Discrimination Policy. Camp Albrecht Acres prohibits any action or conduct which may discriminate against or harass other employees/participants, harass any Camp affiliated family or Camper. Camp Albrecht Acres does not tolerate any actions, words, jokes, or comments based on an individual’s sex, sexual orientation, race, ethnic background, religion, physical condition or other legally protected characteristic. Any actions, therefore, which demean or are hurtful to people of a certain sex, sexual orientation, race, ethnic background, religion, physical condition or other legally protected characteristics are prohibited. Participants exhibiting this behavior may be asked to end their participant relationship with Camp Albrecht Acres.

Medical Treatment. I hereby consent to the administration of first aid and other medical treatment in the event of an injury and agree to pay the costs of any such medical expenses. I hereby release and forever discharge Camp Albrecht Acres and its staff from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment or service rendered in connection with my activities at Camp Albrecht Acres.

Assumption of Risk. I understand that some of the activities in my participation in Special Olympics while at Camp Albrecht Acres may be hazardous. I hereby expressly and specifically assume the risk of injury or harm in the activities and release Camp Albrecht Acres and its affiliated members from all liability, illness, death or property damage resulting from the activities.

Insurance. I understand that I will not be covered by any medical, health, accident, disability or other insurance coverage provided by Camp Albrecht Acres or its staff.

Media Release. I hereby consent to the unrestricted use by Camp Albrecht Acres and/or persons authorized by them of any photographs, recordings, interviews, videotapes, motion pictures or similar visual recording of me.

Other. In all activities, as a participant, I understand that I share in the responsibility for my own safety and for the safety of the group.

I hereby state that I have read this agreement carefully before signing and I understand what it means and what I am agreeing to by signing.

Signed on ______ day of _______ 20____.

___________________________________________________________________________
(Please Print Participant’s Name)

___________________________________________________________________________
(Signature of Parent or Guardian if participant is under 18 years of age)

Delegation Name: ___________________________ Delegation Manager: ___________________________

Delegation Mgr. Email: ___________________________ Delegation Mgr. Cell Phone: ___________________________

Emergency Contact ___________________________ Emergency Contact Cell Phone ___________________________
*Persons less than 16 years of age are only permitted to volunteer under the supervision of a responsible adult.*

**Liability Release.** To be read and understood by all persons intending to do volunteer work for Camp Albrecht Acres. Volunteer does hereby release and forever discharge and hold harmless Camp Albrecht Acres from all liability claims and demands which arise from volunteer’s work for our organization, whether on Albrecht Acres’ grounds or other such volunteer work. The volunteer assumes the risk of injury or harm in the activities and releases Camp Albrecht Acres from all liability for injury, illness, death or property damage resulting from the activities.

**Discrimination Policy.** Camp Albrecht Acres prohibits any action or conduct which may discriminate against or harass other employees/volunteers, harass any Camp affiliated family or Camper. Camp Albrecht Acres does not tolerate any actions, words, jokes, or comments based on an individual’s sex, sexual orientation, race, ethnic background, religion, physical condition or other legally protected characteristic. Any actions, therefore, which demean or are hurtful to people of a certain sex, sexual orientation, race, ethnic background, religion, physical condition or other legally protected characteristics are prohibited. Volunteers exhibiting this behavior may be asked to end their volunteer relationship with Camp Albrecht Acres. *It is the policy of Camp Albrecht Acres to check all volunteer names against the national sex offender registry during the camp season. By signing below, you hereby give Camp Albrecht Acres the permission to perform the above-named check.*

**Medical Treatment.** I hereby consent to the administration of first aid and other medical treatment in the event of an injury and agree to pay the costs of any such medical expenses. I hereby release and forever discharge Camp Albrecht Acres and its staff from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment or service rendered in connection with my activities at Camp Albrecht Acres.

**Assumption of Risk.** I understand that some of the activities in my volunteer services may be hazardous. I hereby expressly and specifically assume the risk of injury or harm in the activities and release Camp Albrecht Acres and its affiliated members from all liability, illness, death or property damage resulting from the activities.

**Insurance.** I understand that I will not be covered by any medical, health, accident, disability or other insurance coverage provided by Camp Albrecht Acres or its staff and that I will not be eligible for any workers compensation benefits.

**Media Release.** I hereby consent to the unrestricted use by Camp Albrecht Acres and/or persons authorized by them of any photographs, recordings, interviews, videotapes, motion pictures or similar visual recording of me.

**Other.** I understand that I will not be paid for my services. In all activities, as a volunteer, I understand that I share in the responsibility for my own safety and for the safety of the group.

I hereby state that I have read this agreement carefully before signing and I understand what it means and what I am agreeing to by signing.

Signed on _______ day of ____________ 20____.

________________________________________________________
Volunteer Group Name: ____________________________________

________________________________________________________
Printed Name

________________________________________________________
Signature (Parent/Guardian if under 18)

________________________________________________________
Address

________________________________________________________
Phone

________________________________________________________
Emergency Contact Phone

Camp Albrecht Acres
14837 Sherrill Road · Sherrill, IA · (563) 552-1771 · office@albrechtacres.org
In the event of an emergency situation (bus accident, hotel fire, athlete/coach/volunteer death, etc.) we must be ready to act. Specific assignments, in order to acquire and disseminate information and date, will be necessary in order for us to make necessary decisions. Communication among ourselves is vital in order for us to manage the situation, rather than just be reactionary. With that as a preface, the following is our initial plan for managing an emergency situation:

Step One – Whoever receives the phone call or message or witnesses an emergency or potential emergency, should determine whether or not the proper authorities (police, rescue squad, fire department, etc.) have been notified. Our first objective is to give the necessary treatment to those injured and to prevent further injury.

Step Two – If an emergency should occur at a venue, the Event Director should be located and directed to the scene. The Event Director should notify Rhonda Schwarzkopf with Special Olympics Iowa at 515-418-2283.

SOIA Staff / Event Directors:

Director of Sports (contact for all venues, banquet, dances, etc.): Rhonda Schwarzkopf
Alpine Skiing: Dawn Criss
Cross Country Skiing: Bryan Coffey
Ice Skating: Katie Schrodt
Snow Shoeing: Sally Briggs

If an emergency should occur on the way to or from an event, please notify Rhonda Schwarzkopf at 515-418-2283. We ask that everyone direct media inquiries and representatives to John Kliegl, SOIA President/CEO, or his designee.
Special Olympics Iowa thanks the following individuals, groups, colleges and organizations for their contributions to the success of the 2020 Special Olympics Iowa Winter Games. Without these generous individuals and organizations Special Olympics Iowa would not be able to offer the quantity and quality of events we do for our athletes, Unified Sports partners, coaches, families and volunteers.

**Winter Games Organizing Committee & Venue Hosts**

- Bruce Barnett
- Jana Beau
- Ron Brietbach
- Dawn Danielson
- Adam Drury-Aldrich
- Tyler & Nicole Duerksen
- Nancy Fett
- Matt Goedken
- Mark Gordon
- Lorene Hynes
- Adrienne Johnson
- Tobi Luetkemeier
- Eric Oeth
- Shannon Poe
- Michelle Rhoades
- Jim Romagna
- Cole Schmelzer
- Nancy Shannon
- Ray Strekal
- Sabrina Strella
- Eric Veltstra
- Dan Wachtel
- Rob Wagner
- Cory Ward
- Mark Zalaznik
- Camp Albrecht Acres
- Grand Harbor Hotel & Resort
- Mystique Community Ice Center
- Sundown Mountain Resort
- Good Sam’s
- Kiwanis Club
- Loras College
- University of Dubuque
- University of Iowa