Special Olympics Iowa State Bowling Tournament Registration Form

Delegation		Area			
Delegation Manager		_ E-mail address			
Day Phone Number*Please list only those numbers at which you	are available	Cell P to acce	hone Numbert a call for Spe	per cial Olympics business	
Number Attending		Males Females Total			
Athletes					
Coaches/Chaperones (anyone listed here must be inccoach/volunteer roster)	cluded on				
# of Athletes and Unified Partners participating at the State Bowling Tournament	Total				
Total Single Bowlers					
Total Doubles Bowlers (# of Bowlers, not teams)					
Total Team Bowlers (# of Bowlers, not teams)					
Checklist: Please check that you've included the following with your State Bowling Tournament registration. If everything is not received your delegation may not be registered for the State Bowling Tournament.					
This Registration Form Coach/Volunteer Roster The Delegation Report (list of qualifiers) you their events All scratches are clearly marked on the Delegation				Office with your a	athletes and

Notes

- The only changes allowed after the registration deadline will be scratches.
- You are responsible for checking ages, gender, events and physical expiration dates.
- Athletes must have a current physical/release form on file at the State Office at the time of the registration deadline.
- Incomplete or expired physical/release form = No participation.
- Unified Partners must have a current Class A Volunteer Application on file with the state office.
- All individuals listed on the Coach/Volunteer Roster must have a current Class A Volunteer Application on file with the state office.

Please send all registration materials to <u>registrations@soiowa.org</u> or to Special Olympics Iowa, 551 SE Dovetail Road, Grimes, IA 50111 by the appropriate deadline.