Special Olympics Iowa Coach/Volunteer Roster

Delegation Name (local program) _____ Delegation Manager _____

Email _____ Cell Phone Number_____ and / or Other Phone Number _____

Coach/Volunteer Name	Birthdate	Role*	Sport*	Coach/Volunteer Name	Birthdate	Role*	Sport*

Please list anyone attending a Special Olympics Iowa competition in any of the roles listed below. Each team is allowed to register one Class A credentialed volunteer for every three athletes on their active roster. It is the responsibility of the Delegation Manager to share information and updates with all other coaches, volunteers, and the family members of the athletes on their roster.

Anyone listed on this roster must have a current Class A certification in order to attend any Special Olympics Iowa competition.

Please indicate the role of the volunteer being registered	**Please indicate the sport of the volunteer being registered using the following**				
DM = Delegation Manager	AS = Alpine Skiing	CCS = Cross Country Skiing	GYM = Gymnastics	SOCS= Soccer Skills	VB = Volleyball
HC = Head Coach (for this sport)	BBS = Basketball Skills	CYC = Cycling	ISK = Ice Skating	SBS = Softball Skills	VBS = Volleyball Skills
AC = Assistant Coach (for this sport)	BBT = Basketball Team	EQ = Equestrian	PB - Pickleball	SBT = Softball Team	
CH = Chaperone (not assigned to a specific sport or athlete)	BOC = Bocce	FF = Flag Football	PL = Powerlifting	SW = Swimming	
1:1 = One on One support for a specific athlete	BW = Bowling	FFS = Flag Football Skills	SS = Snowshoe	TN = Tennis	
SW = Side Walker (for equestrian only)	CHE = Cheerleading	GF = Golf	SOCT = Soccer Team	TF = Track & Field	