

## Special Olympics Iowa Artistic Gymnastics Entry Form

Delegation Name (local program) \_\_\_\_\_ Area (North, East, etc.) \_\_\_\_\_

Gymnastics Head Coach \_\_\_\_\_ E-mail Address \_\_\_\_\_

Cell Phone Number \_\_\_\_\_ and / or Other Phone Number \_\_\_\_\_

Total # of Coaches/Chaperones/1:1 Staff \_\_\_\_\_

**Athletes may only register for three events within a category (artistic or rhythmic).**

Athlete's Name	Gender	D.O.B.	Level A, B, I, II, III, IV	Female & Male Artistic Events			Female Only Artistic Events	Male Only Artistic Events				
				Beam	Floor	Vault		Horizontal Bar	Parallel Bars	Pommel Horse	Rings	Single Bar

**Please put a check mark in the column of the events in which you want to register your athletes.**

**Notes:**

1. Please place an X in the box under the event to indicate in which events the athlete will compete.
2. Current Compulsory Routines, Rules and Judging Sheets can be found for each sport at:
  - Artistic Gymnastics can be found at <http://www.specialolympics.org/Artistic-Gymnastics.aspx>
  - Rhythmic Gymnastics can be found at <http://www.specialolympics.org/rhythmic-gymnastics.aspx>
3. Athletes will be divisioned by the level indicated on this entry form and by age and gender where appropriate.
4. D.O.B. – Date of Birth (MM/DD/YY)

\*Please send all registration materials to [registrations@soiowa.org](mailto:registrations@soiowa.org) or to Special Olympics Iowa, 551 SE Dovetail Road, Grimes, IA 50111.