

ATHLETE SPECIAL PRIVILEGE FORM

Submit with entry/registration form



The Delegation Manager or Head Coach may request a sport rule exception for an athlete. This includes the request of a 1:1 Volunteer needed in the competition area with the intention of aiding the athlete and are not to be used for performance-related instruction or coaching tips. All Special Privilege Forms for area and state competitions should be submitted to registrations@soiowa.org by the registration deadline.

Athlete Name: _____ Athlete Age: _____

Delegation: _____ Coach Name: _____

Sport: _____ Event: _____

Cell Phone: _____ Email: _____

Athlete Disability: _____

REQUEST 1:1 Volunteer need in competition area

- Must obtain prior approval from State Office (not all requests can be approved).
- Check reason (s) and provide a brief explanation below

General Volunteer assistance at the venue – check reason(s) or provide a brief explanation below

<input type="checkbox"/>	Guide to/from event/start	<input type="checkbox"/>	Non Verbal
<input type="checkbox"/>	Behavior issues	<input type="checkbox"/>	Hearing Impaired
<input type="checkbox"/>	Wanders	<input type="checkbox"/>	Visually Impaired
<input type="checkbox"/>	Unsteady on feet	<input type="checkbox"/>	Seizures
<input type="checkbox"/>	Special Equipment – explain below:	<input type="checkbox"/>	Medical condition that may require the administration or consumption of medication, food or liquids during competition – explain below.
<input type="checkbox"/>	Rule exception – explain below:	<input type="checkbox"/>	Other – explain below:

Please provide a brief explanation:

Please note that the Athlete Special Privilege Form needs to be approved before the athlete may compete with the special privilege requested.

Submit with your registration form to registrations@soiowa.org.