Special Olympics Iowa Summer Games Registration Form

Delegation	∖ rea		
Delegation Manager	E-mail address		
Day Phone Number Co	ell Phone Nun ble to accept a call	nber_ for Special Olympi	cs business.
Number Attending:	Males	Females	Total number
Athletes & Unified Partners			
Coaches/Chaperones (anyone listed here must be included on coach/volunteer roster)			
Dorm Option 1 - THURSDAY ONLY	Males	Females	Total # of people on Thursday Only
Option 1: Any/all registered delegation members staying in dorms (athletes, coaches, chaperones, Unified Sports partners, 1:1 staff, etc.)			
Dorm Option 2 – THURSDAY & FRIDAY	Males	Females	Total # of people on Thursday & Friday
Option 2: Any/all registered delegation members staying in dorms (athletes, coaches, chaperones, Unified Sports partners, 1:1 staff, etc.)			
Please list any dietary restrictions and who: (ex. Gluten Free, Dairy Free, any allergies)			
Total Number of Dorm Rooms Requested			
	Males	Females	Total # of people
Total Number of Wheelchair Athletes Registered			
Lunch will no longer be provided at the dorms. Teams	are to eat a	t their sport v	enue location.
Checklist: Please check that you have included the following with your of delegation may not be registered for Summer Games. If you of N/A on the line for that entry form so we know it wasn't miss This completed registration form Coach/Volunteer Roster in each sport form Summer Games Dorm Room Assignments Form	do not have ath		
Competition Entry Forms: Bocce Entry Form Cycling Entry Form Seven-A-Side Soccer Team Entry Form Individual Soccer Skills Entry Form			

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

Tennis Entry Form