

# Final Registration Form

This form is required and must be completed in its entirety. Please complete one form per sport. If you are a program, you may fill out one form for multiple teams, but please complete the contact info for all coaches. All fields on Page 1 are required. Page 2 is to be used if you have more than one team competing, you may disregard if you only have only 1 team. You must also complete the sport specific event registration that accompany this form.

TEAM TYPE	<input type="checkbox"/> Traditional (non-unified) <input type="checkbox"/> Unified Schools <input type="checkbox"/> Community Unified
AGE GROUP	<input type="checkbox"/> 8 – 15 <input type="checkbox"/> 16 – 21 <input type="checkbox"/> 22+
SPORT (write in)	

**Single Team Registration-If registering more than one team, please use Page 2!**

Program Coordinator:	Program:	Area:
Email:	Phone:	
Mailing Address:		
Head Coach Name:	Team Name:	
Email:	Phone:	
Mailing Address:		

**Transportation Request (required)**-if sub/region applicable, provide info for both below. Unified Schools do not need to complete this section. Unapproved transportation will not be paid for. It is the responsibility of the program/team to reserve. No 15 passenger vans.

Event:	Date of Event:
# traveling:	Estimated total cost:
Type of transport (bus/enterprise/own/etc.):	
Name of transportation company:	

Meal Counts:

#'s	Breakfast	Lunch	Dinner
<b>Saturday</b>			
<b>Sunday</b>			

Total Participants:

Coaches	Chaperones	Athletes	Unified Partners	Total

**Additional Teams (All fields required):**

<b>Team Type:</b>	<input type="checkbox"/> Traditional (non-unified) <input type="checkbox"/> Unified Schools <input type="checkbox"/> Community Unified		
Age:	<input type="checkbox"/> 8 – 15	<input type="checkbox"/> 16 – 21	<input type="checkbox"/> 22+
Head Coach:		Team Name:	
Email:		Phone:	
Mailing Address:			
<b>Team Type:</b>	<input type="checkbox"/> Traditional (non-unified) <input type="checkbox"/> Unified Schools <input type="checkbox"/> Community Unified		
Age:	<input type="checkbox"/> 8 – 15	<input type="checkbox"/> 16 – 21	<input type="checkbox"/> 22+
Head Coach:		Team Name:	
Email:		Phone:	
Mailing Address:			
<b>Team Type:</b>	<input type="checkbox"/> Traditional (non-unified) <input type="checkbox"/> Unified Schools <input type="checkbox"/> Community Unified		
Age:	<input type="checkbox"/> 8 – 15	<input type="checkbox"/> 16 – 21	<input type="checkbox"/> 22+
Head Coach:		Team Name:	
Email:		Phone:	
Mailing Address:			
<b>Team Type:</b>	<input type="checkbox"/> Traditional (non-unified) <input type="checkbox"/> Unified Schools <input type="checkbox"/> Community Unified		
Age:	<input type="checkbox"/> 8 – 15	<input type="checkbox"/> 16 – 21	<input type="checkbox"/> 22+
Head Coach:		Team Name:	
Email:		Phone:	
Mailing Address:			
<b>Team Type:</b>	<input type="checkbox"/> Traditional (non-unified) <input type="checkbox"/> Unified Schools <input type="checkbox"/> Community Unified		
Age:	<input type="checkbox"/> 8 – 15	<input type="checkbox"/> 16 – 21	<input type="checkbox"/> 22+
Head Coach:		Team Name:	
Email:		Phone:	
Mailing Address:			

## Head Coaches, Assistant Coaches, Chaperones:

All Head Coaches, Assistant Coaches, and Chaperones must be registered as a Class A volunteer and have a WSP clearance within the last 3 years on file at Special Olympics Washington.

[WSP Background Check](#)

Head Coach (*HC*), Assistant Coach (*AS*), Chaperone (*CH*)

	Last Name	First Name	Gender	Position	WSP Cleared	Notes ( <i>Office Use Only</i> )
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