



Date: January 16, 2019

To: Community Directors and Sports Chairs

From: Emily Tymick, Director of Sports Development & Competition

Re: 2019 Special Olympics Alaska Winter Games Registration Packet *Section I and II*

NOTE: Local Games Results and Winter Games Registration forms have been combined to make the process effective and efficient. Athletes have the opportunity to compete *at a local level* in various sports and events. At *Winter Games* athletes have the opportunity to compete in *1 sport per day and 3 events within that sport within their ability level.*

Enclosed is the 2019 Special Olympics Alaska Winter Games Registration Packet *Section I and II* for the 2019 Special Olympics Alaska Winter Games. Registrations are **due on Monday, February 18, 2019.** Submit to emily@specialolympicsalaska.org

If you have any questions or need assistance, contact me at Toll Free 1-888-499-7625 ext 608.

REGISTRATION PACKET

SECTION I Delegation Information

4 to 1 Ratio Exception
Field of Play Access Request Form
Athlete for Athlete's Oath
HOD/AHOD Contact List

SECTION 1B (Excel) Delegation Roster, Housing List, Travel & Meals

Delegation Roster
Housing Form
Itinerary/Transportation Form
Games Registration Fees
Meals and Special Requests

SECTION II Sport Specific

Local Games Results/Registration (Excel)

Note: Multiple tabs in spreadsheet

4 to 1 Ratio Exception Request Form

Special Olympics Alaska will adhere to the 4:1 ratio closely. Exceptions will require approval from Special Olympics Alaska.

Athlete: _____

Justification: _____

Special Needs:

Athlete: _____

Justification: _____

Special Needs:

Athlete: _____

Justification: _____

Special Needs:

Field of Play Access Request Form

Athlete: _____ Person providing support: _____

Justification: _____

Athlete: _____ Person providing support: _____

Justification: _____

Athlete: _____ Person providing support: _____

Justification: _____

Athlete for Athlete's Oath:

Please select an athlete to participate in the Athlete's Oath at Opening Ceremony.

Athlete: _____

Alternate athlete: _____

Head of Delegation/ Assistant HOD Contact List

Please list the contact information for your Head of Delegation and Assistant Heads of Delegation for the weekend of Games. **Each delegation must have 1 HOD and 1 AHOD for each sport venue they will be present.**

	Last Name	First Name	Sport	Phone number during Games Local Cell preferred
CD				
HOD				
AHOD				

SECTION II

Sports Specific Registration

LOCAL GAMES RESULTS & WINTER GAMES EVENT REGISTRATION

FINAL STEPS

Complete *Section II* (Excel spreadsheet, with multiple worksheets)

NOTES:

- ***Please complete Section IB and Section II electronically (not handwritten).***
- ***Please return all local results and registration documentation to emily@specialolympicsalaska.org***
- ***Please indicate the event that the athlete/partner will compete in at Winter Games by marking the “Competing at Winter Games” box on the Local Games results forms.***
- ***Section II forms include:***
 - ***Alpine Skiing (Higher/Lower Ability) – enter times from local competition for each event.***
 - ***Snowboarding (Higher/Lower Ability) – enter times from local competition for each event.***
 - ***Floor Hockey Individual Skills – enter scores from skills assessment (This event is NOT offered at the 2019 Special Olympics Alaska Winter Games)***
 - ***Floor Hockey Team (Skills Assessment) – Enter Assessments Scores, indicate team name, color and coach.***
 - ***Floor Hockey Team – submit one form per team***
 - ***Figure Skating – enter level***
 - ***Snowshoeing – enter times from local competition for each event***
 - ***Cross Country Skiing – enter times from local competition for each event***