

*A Celebration  
of Area  
Award  
Winners...*



**Special Olympics**  
Wisconsin  
Be a fan™



## 2009 Volunteer Awards Recognition Program

Athletes are the heart of Special Olympics Wisconsin, but volunteers make it beat. More than 17,000 volunteers annually give more than 300,000 work hours to SOWI. Join us as Lambeau Field Atrium welcomes us to The Legends Club Room **July 19, 2009** to celebrate and thank our volunteer award winners.

<b>Legends Club Room, Green Bay</b> ( <i>Dress: semi formal</i> )	
Stadium Tours (per request* \$10 per person)	10:30 am-12 pm
Reception	1-2 pm
Meal	2-3 pm
Program	3-4:30 pm

## Cost \_\_\_\_\_

\$20 ticket includes chicken dinner (with vegetarian option) & awards program.

## Hotel

A room block is reserved on July 18-19 under SOWI. Call the hotel directly for reservations & payment. Rooms are first come, first serve until reservations fill.

**Hilton Garden Suites**  
1015 Lombardi Ave  
Green Bay, WI 54304  
(920) 405-0400  
www.greenbay.hgi.com

Rate: \$80.00 for 1 king bed,  
\$85.00 for 2 beds

## Extras \_\_\_\_\_

**Packers Pro Shop hrs:** 10am - 5pm  
**Stadium tours:** available for \$10 each with reservation on your registration.  
**Packers Hall of Fame hrs:** 9 am - 6 pm  
Admission \$10 per adult

**See reverse side to register for event...**

To join the celebration, complete this RSVP and mail with payment by **Monday, June 22, 2009** to Special Olympics Wisconsin, attn: Awards Ceremony Registration, 5900 Monona Drive, Suite 301, Madison, WI 53716. **All payments are due with this registration and payable to SOWI.** We encourage Agencies to attend as this is an appropriate use of SOWI Agency funds. **SOWI will mail tickets as confirmation of receipt.**

\_\_\_\_\_ Total # for dinner @ \$20 per ticket = \$\_\_\_\_\_ Total  
 (please indicate name(s) of attendees & if accessible seating is needed)  
 name \_\_\_\_\_ name \_\_\_\_\_  
 name \_\_\_\_\_ name \_\_\_\_\_  
 name \_\_\_\_\_ name \_\_\_\_\_

\_\_\_\_\_ Total # interested in Stadium tour @ \$10 per ticket. Tour time I prefer is\*: = \$\_\_\_\_\_ Total  
 10:30 - 11:30 tour     11 - 12 tour     11:30 - 12:30 tour     12 - 1 tour

\*SOWI reserves right to alter tour times to meet minimum tour requirements. \$\_\_\_\_\_ **Grand Total**

Contact person completing this form: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of award winner you are supporting \_\_\_\_\_

----- Cut & mail form in with payment -----



**Questions? Contact Jeanne Hrovat at (800) 552-1324 ext. 206 or [jhrovat@specialolympicswisconsin.org](mailto:jhrovat@specialolympicswisconsin.org)**