## **Special Olympics Wisconsin** 2017 – 2018 INTENT TO PLAY TEAM SPORTS

\*Important – To be eligible for competition, any Special Olympics Wisconsin Agency that is considering a team(s) for the following season must fill out and return this form to the Regional office post marked by:

## **Outdoor Sports Season**

Tee ball, Softball, Bocce

May 1, 2018

This form will assist Special Olympics Wisconsin in providing quality training and competition experiences (i.e. league play, local competitions, scrimmage games, Regional/district/State competitions.)

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Primary Agency Contact: Address mus	st be filled out clearly and completely.
Agency Name:	Agency Number:
Contact Person: (This is the person who will	receive materials.)
	Home Phone:()
Address:	
City:	State: Zip:
Fax: ()	
One form must	be filled out per sport season.
SPORT: SOFTBALL	I Teeball Teams expected:
SPORT: BOCCE Maximum Number of Traditiona	I Bocce Teams expected:
Do you have coaches who need  Yes No (please check y If so, which sport(s)?	to attend a certified training school?  yes or no)