# 2019 SUMMER GAMES SEASON OVERVIEW - ATHLETICS EVENT DESCRIPTIONS

### **OFFICIAL EVENTS OFFERED:**

1. ATH	LETICS	ATSPIW	Shot Put-Female: 8-11
Event Code	Event Description	ATSP2W	Shot Put-Female: 12+
AT50MDEV	Assisted Run (Regional only, non-advancing)	ATSOBT	Softball Throw (cannot do with Mini Javelin)
AT050M	50m run	ATJAVJR	Mini Javelin 8-15
AT100M	100m Run	ATJAVSR	Mini Javelin 16+
AT200M	200m Run	AT4X100W	4x100m Walking Relay
AT400M	400m Run	AT4X100WU	<b>5</b> ,
AT800M	800m Run	AT4X100M	4 x 100m Relay
AT1500M	1500m Run	AT4X200M	4 x 200m Relay
AT3000M	3000m Run	AT4X400M	4 x 400m Relay
AT25MW	25m Walk	AT4X100U	4 x 100m Unified Relay
AT100W	100m Walk	AT25WH	Wheelchair-25m
AT200W	200m Walk	AT100WH	Wheelchair-100m
AT400W	400m Walk	AT200WH	Wheelchair-200m
AT800W	800m Walk	AT30WS	Wheelchair-30m Slalom
AT1500W	1500m Walk	AT50MS	Motor Wheelchair-50m Slalom
ATLNJP	Long Jump (Must be able to jump at least 1m)	AT30MS	Motor Wheelchair-30m Slalom
ATSTLJ	Standing Long Jump	ATWHOB	Motor Wheelchair-25m Obstacle
ATSP2M	Shot Put-Male: 8-11	AT4X25M	4 x 25 Wheelchair Shuttle Relay
ATSP4M	Shot Put-Male: 12+	ATWSP1M	Wheelchair Shot Put-Male
		ATWSP1W	Wheelchair Shot Put-Female

## **ELIGIBILITY FOR SUMMER GAMES SEASON COMPETITION**

- 1. Valid Special Olympics Release Form and the Application For Participation in Special Olympics in the Headquarters office postmarked by **April 1, 2019** to remain valid through **June 8, 2019**.
- 2. Athletes must have participated in at least eight weeks of official Special Olympics training prior to State competition.
- At Regional tournaments and State Summer Games, athletes are eligible to compete in only one of the four sports offered. Agency quota will be based on the number of participating athletes, and advancement will be conducted according to Article I of the General Rules (see General Competition Policies).
- 4. An athlete in athletics may participate in a **maximum** of three events (three individual, two individual and one relay, or one individual and two relays).
- 5. Wheelchair athletes can enter a maximum of three athletic events. Motorized wheelchair athletes may not enter non-motorized events (and vice versa). Note: Bicycles or tricycles [i.e., gear/pedal powered vehicles] are not legal in wheelchair competitions.
- 9. SOWI will issue to each Agency a quota for State Summer Games athletics and swimming participation separately, based on the current year's Regional involvement. Every Agency must follow the advancement policies described in the General Information section of the Competition Guide to determine which athletes advance.

#### PLEASE READ FORMS CAREFULLY!

# 2019 REGIONAL ATHLETICS REGISTRATION ATHLETE ROSTER

Please Print Clearly:							
Agency Number:Agency Name:							
*Head Coach:	W <u>: (</u>	)	H: <u>(</u>	)	Fax: <u>(</u>	)	
Address:							
E-mail:	С	(City) <b>ell phone co</b>		(State) <b>er while at</b>	the Tourname	nt: (	)
Additional email you would like games information	on sent to:						
RETURN THIS FORM T	O YOUR REGIO	NAL OFFICE	BY THE PU	JBLISHED	DEADLINE DA	TE!	
I have verified that all chaperones attending	the tournament a	are approve	d SOWI Clas	s A certific	ed volunteers [	(check	∢√).
Number of coaches and chaperones that will attend	the Regional tourn	ament:	Reminder:	athlete to c	oaches/chaperor	ne ratio is r	ninimum of 4:1
Will you be taking qualifying athletes to the State	e tournament?	☐ Yes	☐ No				
**Registration information for this Regional even	t will be sent to th	e person list	ed as head c	oach.			
*Use best performance for qualifying score.	*Enter all distar	nces in <b>mete</b>	<b>rs</b> . Example:	1 meter, 2	centimeters is	1.02 mete	ers.

MAXIMUM: THREE EVENTS  • 3 INDIVIDUAL			1ST EVENT	*QUALIFYING SCORE	2ND EVENT OR RELAY	*QUALIFYING SCORE	3RD EVENT OR RELAY	*QUALIFYING SCORE		
<ul><li>2 INDIVIDUAL &amp; 1 RELAY</li><li>1 INDIVIDUAL &amp; 2 RELAY</li></ul>		CATEGORY LETTER	EVENT CODE	MIN: SEC. 1/10 M . CM	EVENT CODE	MIN: SEC. 1/10 M . CM	EVENT CODE	MIN: SEC. 1/10 M . CM		
ATHLETE NAME (ALPHABETICAL: LAST NAME, FIRST)					RELAY TEAM NAI	ME (15 CHAR. MAX)	RELAY TEAM NAM	ME (15 CHAR. MAX)		
Example, John	D	AT100M	1:09.3	ATLNJP	1.12	AT4X100M	2:45.2			
Example, John	Example, John				R1.		R2. Road Runners			

(OVER)

\*Use best performance for qualifying score.

\*Enter all distances in **meters**. Example: 1 meter, 2 centimeters is 1.02 meters.

	MAXIMUM: THREE EVENTS  • 3 INDIVIDUAL		1ST EVENT	*QUALIFYING SCORE	2ND EVENT OR RELAY	*QUALIFYING SCORE	3RD EVENT OR RELAY	*QUALIFYING SCORE
	<ul><li>2 INDIVIDUAL &amp; 1 RELAY</li><li>1 INDIVIDUAL &amp; 2 RELAY</li></ul>	CATEGORY LETTER	EVENT CODE	MIN: SEC. 1/10 M . CM	EVENT CODE	MIN: SEC. 1/10 M . CM	EVENT CODE	MIN: SEC. 1/10 M . CM
	<b>ATHLETE NAME</b> (ALPHABETICAL: LAST NAME, FIRST)				RELAY TEAM NAME (15 CHAR. MAX)		RELAY TEAM NAME (15 CHAR. MAX)	
1								
					R1.		R2.	
2					R1.		R2.	
3								
					R1.		R2.	
4					R1.		R2.	
5								
					R1.	1	R2.	
6					R1.		R2.	
7								
1					R1.		R2.	
8					R1.		R2.	
					IXI.		114.	
9					R1.	<u> </u>	R2.	
10								
					R1.		R2.	

\*Use best performance for qualifying score.

\*Enter all distances in **meters**. Example: 1 meter, 2 centimeters is 1.02 meters.

MAXIMUM: THREE EVENTS  • 3 INDIVIDUAL		1ST EVENT	*QUALIFYING SCORE	2ND EVENT OR RELAY	*QUALIFYING SCORE	3RD EVENT OR RELAY	*QUALIFYING SCORE
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ATHLETE NAME (ALPHABETICAL: LAST NAME, FIRST)				RELAY TEAM NAME (15 CHAR. MAX)		RELAY TEAM NAME (15 CHAR. MAX)	
				R1.		R2.	
				I Kii		T.C.	
				R1.	1	R2.	:
				R1.		R2.	
				R1.	1	R2.	-
				R1.		R2.	
				R1.		R2.	
				R1.		R2.	
				D.		- DO	
				кт.		KZ.	
				R1.		R2.	
				P1		P2	
	<ul> <li>3 INDIVIDUAL</li> <li>2 INDIVIDUAL &amp; 1 RELAY</li> <li>1 INDIVIDUAL &amp; 2 RELAY</li> </ul> ATHLETE NAME	3 INDIVIDUAL     2 INDIVIDUAL & 1 RELAY     1 INDIVIDUAL & 2 RELAY  ATHLETE NAME  CATEGORY LETTER	3 INDIVIDUAL     2 INDIVIDUAL & 1 RELAY     1 INDIVIDUAL & 2 RELAY  ATHLETE NAME      CATEGORY LETTER  EVENT CODE	3 INDIVIDUAL     2 INDIVIDUAL & 1 RELAY     1 INDIVIDUAL & 2 RELAY  ATHLETE NAME  SCORE  CATEGORY LETTER  LETTER  SCORE  MIN: SEC. 1/10 M . CM	** 3 INDIVIDUAL & 1 RELAY  ** 2 INDIVIDUAL & 2 RELAY  ** 1 INDIVIDUAL & 2 RELAY  ** ATHLETE NAME (ALPHABETICAL: LAST NAME, FIRST)  ** CATEGORY LETTER**  ** EVENT CODE**  ** CATEGORY LETTER**  ** EVENT CODE**  ** MIN: SEC. 1/10  ** RELAY TEAM NA*  ** R1.  ** R1.	SORE ORRELAY SCORE VENT CODE STEVENT SCORE ORRELAY SCORE ORRELAY SCORE WIN: SEC. 1/10 EVENT CODE MIN: SEC. 1/10 RELAY TEAM NAME (15 CHAR. MAX)  RELAY TEAM NAME (15 CHAR. MAX)  R1.  R1.  R1.  R1.  R1.  R1.  R1.  R1	** 3 INDIVIDUAL & 1 RELAY ** 2 INDIVIDUAL & 2 RELAY ** 1 INDIVIDUAL & 2 RELAY ** THE TENAME (ALPHABETICAL: LAST NAME, FIRST)  ** THE TENAME (ALPHABETICAL: LAST NAME, FIRST)  ** R1. R2.  ** R1. R2.