

# 2020 State Special Olympics Gymnastics Registration Form

Return these forms by March 1, 2020 via email [ahsloths29@gmail.com](mailto:ahsloths29@gmail.com).

Agency Name \_\_\_\_\_ Agency Number \_\_\_\_\_

Head Coach Name \_\_\_\_\_

Head Coach Contact Number \_\_\_\_\_ Email \_\_\_\_\_

Head of Delegation HOD while at the Games \_\_\_\_\_

Head of Delegation HOD Cell phone Contact number while Games \_\_\_\_\_

Delegation

Total Male athletes \_\_\_\_\_

Total Male athletes W wheel chair \_\_\_\_\_

Total Female athletes \_\_\_\_\_

Total Female athletes W wheel chair \_\_\_\_\_

Total Number of Athletes \_\_\_\_\_

Athlete entry fee 10.00 \_\_\_\_\_

Total Due SOWI \_\_\_\_\_ In House Account Funds will be automatically transferred

Concession will be available at your cost.

Certified Gymnastic Coaches \_\_\_\_\_

Certified Gymnastic Coaches \_\_\_\_\_

Certified Gymnastic Coaches \_\_\_\_\_

Chaperones \_\_\_\_\_

Chaperones \_\_\_\_\_

Chaperones \_\_\_\_\_

**Please note: Per SOI, the new Artistic Gymnastics routines for the 2019-2027 Gymnastics season will be used at this year's SOWI State gymnastics competition. The routines can be found on the SOI website: [www.specialolympics.org](http://www.specialolympics.org)**

It is the Head coach's as listed with SOWI and on this forms responsibility to insure that all Athletes have participate in eight weeks of official Special Olympics training prior to competition. Athletes have a current medical on file with SOWI, all athletes/coaches have met all SOWI requirements are familiar with SOWI Gymnastics rules and regulations listed in the SOWI competition guide. **The head coach will proof entries for to ensure athletes are entered in the proper event and level.**

\_\_\_\_\_  
Agency Manager Signature

\_\_\_\_\_  
Head Coach Signature

# 2020 State Special Olympics

## Women's Artistic Gymnastics Registration Form

Team Name \_\_\_\_\_ Agency # \_\_\_\_\_

*Please note the level in the box for each event the athletes will be doing. Example: A/1/2/3.  
Athletes must compete at the same level for all events to be eligible for the all-around.*

<b>Name</b>	<b>Age</b>	<b>Vault</b>	<b>Bars</b>	<b>Beam</b>	<b>FLEX</b>	<b>All Around</b>
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						

# 2020 State Special Olympics

## Men's Artistic Gymnastics Registration Form

Team Name \_\_\_\_\_ Agency # \_\_\_\_\_

*Please note the level in the box for each event the athletes will be doing.*

SOWI Events include:

*Men's Level 1 & 2 – Include Bars*

*Men's Level 1-3 – Include Vault & Floor Ex.*

*Co-Ed Level A - Include Wide Beam*

Name	Age	Vault	Bars	Floor Ex
1				
2				
3				
4				
5				
6				
7				

Co Ed Level A	Wide Beam	Vault
1		
2		
3		

# 2020 State Special Olympics

## Women's Rhythmic Gymnastics Registration Form

Team Name \_\_\_\_\_ Agency # \_\_\_\_\_

*(Please note the level in the box for each event the athletes will be doing. Example: A/1/2/3.*

**SOWI Events include:**

*Rhythmic Co-Ed Level A - Include Ball, Hoop, Rope, and Ribbon, All Around.*

*Rhythmic Women's B, C & 1 - Include Ball, Hoop, Rope, Ribbon, All Around*

*Rhythmic Level 2 & 3 - Include Ball, Hoop, Clubs, Ribbon, All Around*

*Athletes must compete at the same level for all events to be eligible for the all-around.*

### Level A, B, C, 1

**All**

Name	Age	Ball	Hoop	Rope	Ribbon	All Around
1						
2						
3						
4						
5						
6						
7						
8						
<b>Level 2</b>	<b>Age</b>	<b>Ball</b>	<b>Hoop</b>	<b>Clubs</b>	<b>Ribbon</b>	<b>All Around</b>
1						
2						
3						
4						
<b>Level 3</b>	<b>Age</b>	<b>Ball</b>	<b>Rope</b>	<b>Clubs</b>	<b>Ribbon</b>	<b>All Around</b>
1						
2						
3						