

2012 Winter Games Alpine Registration

Due: February 8, 2012

Local Program: _____

Local Coordinator: _____

Email: _____

Please count only those participants and personnel for **Alpine**.

Participant Counts

	Meal Count	Overnight Count	Lift ticket Count
Athlete			
Partner			

Personnel Counts

	Meal Count	Overnight Count	Lift Ticket Count	
Local Coordinator				
Coach				
Assistant Coach				
Chaperone				Total Lift Ticket Count
Hometown Escort				

Forms are sent to your Regional Office

SOCT Southwest Office
101 Merritt Blvd, Suite 10
Trumbull, CT 06611
203.350.9990 Phone
203.380.9991 Fax
jenniferw@soct.org

SOCT Eastern Office
401 W. Thames St., Suite 107
Norwich, CT 06360
860.887.1555 Phone
860.887.7435 Fax
timc@soct.org

SOCT Northwest Office
1459 South Britain Rd.
Southbury, CT 06488
203.267.6566 Phone
203.349.6570 Fax
rebeccab@soct.org

All Local Programs must adhere to the following event category distribution process in order to ensure each athlete's full participation in the 2012 Winter Games.

1. Athletes are restricted to participation within one category as outlined below.
2. Athletes may register for a maximum of two events.
3. Athletes are registered in one level only. Levels are Developmental, Novice, Intermediate and Advanced.
4. Athletes registered in Categories 4 and 5 must be advanced skiers.

Category	Alpine Events Selection
Category 1	10M Walk, Glide, Snowboard Glide, Snowboard Heel Turns for Developmental.
Category 2	Super Glide1, Super Glide 2 for Developmental.
Category 3	Downhill, Slalom, Giant Slalom, for Novice, Intermediate and Advanced skiers.
Category 4	Unified Downhill, Unified Slalom, Unified Giant Slalom for Advanced skiers only.
Category 5	Snowboard Giant Slalom, Snowboard Downhill, Snowboard Unified Downhill for advanced skiers.

Please save this document and email it to your Regional Program staff:

Eastern Region: timc@soct.org

Northwest Region: rebeccab@soct.org

Southwest Region: [jenniferw @soct.org](mailto:jenniferw@soct.org)

Event	Code
10 Meter Walk	AS10MR
Glide Event	ASGLID
Super Glide Event 1 and 2	ASSGL1and/or 2
Downhill	ASDH
Unified Downhill	ASUDH
Giant Slalom	ASGTSL
Unified Giant Slalom	ASUGTS
Slalom	ASSLAL
Unfied Slalom	ASUSLA
Snowboard Giant Slalom	SNGTSL
Snowboard Downhill	SNDH
Snowboard Unified Downhill	SNUDH
Snowboard Glide	SNGL
Snowboard Heel Turns	SNHT

10 Meter Walk
Glide Event
Super Glide Event
Downhill
Unified Downhill
Giant Slalom
Unified Giant Slalom
Slalom
Unified Slalom
Snowboard Giant Slalom
Snowboard Downhill
Snowboard Unified Downhill
Snowboard Glide
Snowboard Heel Turns

1 Developmental
2 Novice
3 Intermediate
4 Advanced
5

Assist. Coach
Chaperone
Hometown Escorts

Instructions for Registering Personnel

All of the individuals listed below are to have their Class A certifications including Protective Behaviors current before being registered for any SOCT event.

Local Coordinators: Each Delegation (Local Program) is allotted space for two Local Coordinators (LC). Please list the LC responsible for overseeing the delegation at the event on the Checklist page. The Local Coordinators are not counted in the additional personnel ratio.

ADDITIONAL PERSONNEL:

Head Coach: Please list the Head Coach for each sport with their current contact information on each roster page. Head Coaches are not listed on the personnel page, but are listed on the housing form.

Assistant Coach: Please list Assistant Coaches with their current contact information on the personnel page and housing form.

Chaperone: Please list Chaperones with their current contact information on the personnel page and housing form.

Additional Personnel Ratio:

3 athletes to 1 Additional Personnel

1 athlete to 1 Additional Personnel for athletes who use a wheelchair or who are legally blind.

Hometown Escorts: Please list Hometown Escorts on the Personnel Page. Hometown Escorts are individuals that delegations recruit to meet the team during the day. These individuals are not to be included in housing count, or the Additional Personnel count. Hometown Escorts do not stay overnight.

Hometown Escort Ratio:

2 athletes to 1 Hometown Escort

Please note on the personnel page those who are group home staff and which day/days they will be in attendance.

No registration fees will be charged for Personnel provided the Athlete to Personnel Ratio is adhered to. Delegations registering Additional Personnel and Hometown Escorts that exceed the ratios for what ever reason will be charged \$40.00 per person.

Special circumstances (such as behavioral issues, medical, etc.), may require that you bring Additional Personnel or Hometown Escorts for adequate supervision. These requests must be in writing and must be included with your registration packet. The LC will be notified if the request is granted and if there will be a cost associated with the request.

Additional Personnel Local Program: _____

List **only** those who have completed the Class A screening process and completed Protective Behaviors below.
Please specify Junior vs/ Senior for those in your delegation with the same last name.

List the day which a group home staff person (registered as a chaperone or hometown escort) will attend.

	First/Last Name	Street/City	Zip	Email	Type	Group Home Staff Day
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

Special Olympics Connecticut

Roster Appeal/ Scratch Form

Roster changes and participant scratches will be accepted up to TWO WEEKS prior to the day of the event. Please refer to the Dates to Remember sheet for exact deadline
Participants added to your delegation MUST have all necessary paperwork on file at the State Office

Delegation: _____

Please remove (**scratch**) from this delegation

Name
1 _____
2 _____
3 _____
4 _____
5 _____
6 _____
7 _____

Please add to this delegation:

Name	Event	Team Name <i>if applicable</i>
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____
4 _____	_____	_____
5 _____	_____	_____
6 _____	_____	_____
7 _____	_____	_____

Date: _____
Submitted By: _____



Special Olympics Connecticut

2012 Winter Games
Athlete Escort Survey

Delegation: _____

Name: _____

This person responsible for picking up the Athlete Escorts

Please list all of the Athlete Escorts your delegation wishes to request for the 2012 Winter Games. Please plan accordingly!!

	Alpine	Snowshoe	Cross Country	F. Skating	S. Skating	Floor Hockey
Fri						
Sat						
Sun						

Per SOI, Athlete Escorts by definition are Class "B" Volunteers. Class "B" Volunteers by definition do not have to be screened and cannot be alone at any time with an athlete.

Class "B" Volunteers:

1. Have limited contact with athletes while accompanied by coaches and chaperones.
2. No screening required.
3. Includes but not limited to Day of Volunteers, Athlete Escorts, Healthy Athlete Volunteers.
4. Must sign in at volunteer registration as day of/ walk-in on sign-in sheet and present photo ID (an adult can vouch for a minor on the day of the event)