

2026 Unified Fall Sports Festival Softball Team Registration

DUE: July 17, 2026

Skills Registration

DUE: August 17, 2026

Local Program: _____

Local Coordinator: _____

Email: _____

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

Participant Counts

Fee for this event is \$30.00	Meal Count
Athlete	
Partner	

Personnel Counts

	Meal Count
Local Coordinator	
Head Coach	
Coach	
Assistant Coach	
Chaperone	
Hometown Escort	

Please send all registration to:

emilyp@soct.org

Dave Pellino will be overseeing

Softball this year, please refer to him with all inquiries:

davep@soct.org

Team Registration is due by July 17th
Skills Registration is due by August 17th

Divisioning:

1. Teams will be divisioned according to:
 - a. Scores compiled from each athlete's score on the Softball Skills Assessment Tests (SATs) of **Hitting and Base Running; Throwing, Fielding and Batting**. These Tests are for player/team competition events for assessment only and are not for medals and ribbons.
 - b. A classification round of games
2. Coaches must submit a Softball Skills Assessment Test Score for each player on their roster prior to the competition
3. The "team score" shall be determined by adding the top 12 players' scores and then dividing that total by 12. the top 12 players are considered the top 6 athletes and the top 6 partners.
4. Teams are initially grouped in divisions according to their SAT team score. A Classification round of games shall then be conducted as a means of finalizing the divisioning process.
5. In the classification round, teams will play one or more games with each game lasting no longer than 30 minutes. Each team will be required to play all 12 players whose scores were used to determine the "team score". Both teams will be the field and to bat.

Roster sizes

Unified Sports Softball

- 1 Roster Requirements: Minimum of 14 players: 7 Athletes, 7 Partners; maximum of 18 players, which includes 2 alternates.
- 2 Unified Team configuration recommended to be equal or one more athlete.
- 3 Unified Team configuration recommended to be no than a 2 person differential between the number of athletes and partners.
- 4 Teams are strongly encouraged to have 2 subs for both athletes and partners going into competition.
- 5 Going into competition, a team may come with the minimum number of players provided they have at least 5 athletes and partners.

Traditional Softball

- 1 Roster requirements: Minimum of 12 players; maximum of 18 players, which includes 2 alternates.
- 2 Teams are strongly encouraged to have 2 subs for athletes going into competition.
- 3 Going into competition, a team may come with the minimum number of players provided they have at least 10.

Age Groups **Juniors (8-16)**
 Seniors (13-21)
 Masters (18+)

Please direct all questions regarding Softball to:

Troy Sundwall

troys@soct.org

Local Program Name:						Team Assessment Score =		Total of top 12 players	Total of bottom 12 players
Local Program Coordinator:						Pitching Score =			
Coach Information						Coaching Score =			
First/Last Name	Type		Cell Phone		Email Address		2026 Traditional Softball Registration		
	HEAD Coach						Team name:		
First /Last Name	DOB	Age	M/F	A/P	Event	Hitting and Base Running	Throwing, Fielding, Batting	Total	
				A					
				A					
				A					
				A					
				A					
				A					
				A					
				A					
				A					
				A					
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				A					
				A					
				A					
				A					
									Alternate
									Alternate
For office use only:									
					Team age group: _____		Number of exemptions: _____		
					Number of Athletes: _____				

[illegible]

[illegible]

[illegible]

Softball Skills 2026 Registration Form: Due 8/17

Local Program Name:			
Local Program Coordinator:			
Coach Information			
First/Last Name	Type	Cell Phone	Email Address
	HEAD Coach		

[illegible]

Instructions for Registering Personnel

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

Programs may not register more Head Coaches, Assistant Coaches, Chaperones, and Hometown Escorts than the number of registered athletes.

Local Coordinators: Each Delegation (Local Program) is allotted space for **two Local Coordinators (LC)**.

Please list the LC responsible for overseeing the event Checklist page. Registration fees do not apply to the two Local Coordinators

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.

***See below for registration fee information.**

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

***See below for registration fee information.**

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

***See below for registration fee information.**

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 counts, nor to be put on the housing forms as they are not allowed to stay overnight.

***See below for registration fee information.**

Registration fees:

No registration fees will be charged for Personnel provided the Athlete to Personnel Ratio is adhered to. The ratio is as follows:

1:1 Athletes who use a wheelchair or athletes who are legally blind.

3:1 All other athletes.

Special circumstances (such as behavioral issues, medical, etc.), may require that you bring additional personnel 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.

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

All others over the 3:1 ratio will be charged \$175 that covers meal expenses.

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.

DO NOT LEAVE ANY OF THESE COLUMNS BLANK. PLEASE FILL OUT COMPLETELY.

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Special Olympics Softball Tournament 2026

Roster Appeal/ Scratch Form

Roster changes and participant scratches will be accepted up until **TWO WEEKS (Sept 4th)** prior to the day of the event. Please refer to the Dates To Remember sheet for the 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 *if applicable*

- | | | |
|----------|-------|-------|
| 1) _____ | _____ | _____ |
| 2) _____ | _____ | _____ |
| 3) _____ | _____ | _____ |
| 4) _____ | _____ | _____ |
| 5) _____ | _____ | _____ |
| 6) _____ | _____ | _____ |
| 7) _____ | _____ | _____ |

Date: _____

Submitted By: _____

Special Olympics Connecticut

Explanation of Absence from Qualifier form

Absence forms will be only accepted for the following reasons:

1. Illness with a doctor's note.
2. Religious reasons.

This form must be received in the SOCT State Headquarters within 3 days after the event.

Delegation

Participant Name

Qualifier missed

Date

Coach Information

Name

Phone

Qualifiers include:

Unified and Traditional Cycling

Spring Time Trials

Unified and Traditional Softball

Unified Basketball

Scoring:	1=Never	2= Rarely	3=Sometime	4=Frequently	5=Always
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6. The Skill Assessment Test shall consist of the following

a. **Hitting and Base Running**

Score

Enters batter's box

Assumes proper batting stance

Tracks pitches to bat

Makes good pitch selections to swing

Know pitch count and situations

Has good bat control

Can hit the ball with power

Can place the hit to all fields

Drops or carries the bat after the ball is hit

** Can run with speed

Avoids fielders while running

Rounds a base without breaking stride

Slides into a base when needed

Reacts to coach's signs, signals or directions

Looks for the ball and decides to stop or continue

Tags up on caught fly balls

b. **Fielding, Throwing, and Catching**

Cleanly fields a grounded ball hit directly at them

Moves laterally to a grounded ball and fields it cleanly

Catches a fly ball hit to them

Catches a fly ball on the run

Can leap to catch a fly or thrown ball

Can drive to field a hit or thrown ball

Can position them self at a base to catc a thrown ball

Can properly grip a ball

Can throw a ball with velocity

Knows where to throw the ball without coaching

Has a quick release

** To determine base speed a timer should be used and charted. Fast, slow and average times should be based upon the base distance and field conditions.

Softer sand infields will be considerably slower than artificial surfaces or cement.

Objectivity is important as fast in younger skills athletes is NOT fast by adult athletic standards!

Scoring:	1=Never	2= Rarely	3=Sometime	4=Frequently	5=Always
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Continued

c. **Pitching**

Score

- Remains in contact with the pitching rubber
- Pauses on the pitcher's plate prior to the pitch
- Can maintain a legal arc (6-12')
- Pitches with accuracy
- Knows the count and makes appropriate pitch selection
- Finishes the pitch in fielding-ready position
- Makes sure team is ready prior to each pitch
- Is a team leader

d. **Coaching (Overall Team Grades for all Coaches)**

- Have good control of team
- Communicate will with athletes and partners
- Have knowledge of rules
- Have a positive attitude
- Are prepared (line-up cards, equipment, etc...)
- Can direct runner from coach's box

EXEMPTION REQUEST

A complete team roster is required

This request must accompany your roster and is due by the registration due date

Athlete/Partner Name:

Date of Birth:

Age as determined by the date of competition

Sport:

Coach Name:

Team Name:

Local Program:

AGE GROUP FOR WHICH EXEMPTION IS REQUESTED (please check one)

Traditional and Unified Teams may request no more than 2 exception for an athlete or partner to play up or down one age group.

- ☐ Junior 8-16yrs
- ☐ Senior 13yrs-21yrs
- ☐ Masters 18+yrs

Please explain the details and rationale for your request:

I confirm that the Athlete/Partner meets the criteria necessary to play up or down to the age group requested above:

- * Athlete/Partner's skill, strength, speed, size and social maturity are comparable to the requested age group
- * There is no risk to the health and safety of any athlete/partner on that team
- * An athlete/partner may only play up or down one age group
- * There will be no more than two combined age groups on a team

Coach Signature

Local Coordinator Signature

If Athlete/Partner is under 18

Parent/Guardian Signature

This document must be sent with your team roster and registration to:

Special Olympics CT

2666 State St., Suite 1

Hamden, CT 06517

derrickf@soct.org