

2026 Winter Games
Cross Country Skiing
Registration AND Housing Due: February 2, 2026

Local Program: _____

Local Coordinator attending event: _____

Email: _____

Participation fee for this event is \$60.00.

Please count only those participants for Cross Country Skiing

Participant Counts

	Meal Count	Overnight
Athletes		
Partners		

Personnel Counts

	Meal Count	Overnight
Local Coordinator		
Head Coach		
Coach		
Assistant Coach		
Chaperone		
Hometown Escorts		N/A

**ALL PARTICIPANT CERTIFICATIONS MUST BE CURRENT AT
THE TIME OF REGISTRATION**

For information pertaining to Snowshoe registration

Send form to: _____ and competition please contact:

kathryny@soct.org

Katie York

203-230-1201 ext. 224

USING SECURE EMAIL

kathryny@soct.org

Event Information

Event Codes

Event	Code
50M	CC050M
100M	CC100M
4x100M Traditional Relay	CC4100M
4X100M Unified Relay	CC4X100MU

Times must be submitted

Times must be submitted

Cross Country Skiing Registration Form

Registration Due: February 2, 2026

Local Program Name:

Local Program Coordinator:

List **HEAD** Coach Information Below

First/Last Name	Type	Cell Phone	Email Address
	HEAD Coach		

Athletes are restricted to participation within one category as outlined on the information page.

List relay events on the relay page

Cross Country Skiing Registration Form

Registration Due: February 2, 2026

Local Program Name:

Local Program Coordinator:

List **HEAD** Coach Information Below

First/Last Name	Type	Cell Phone	Email Address
	HEAD Coach		

Athletes are restricted to participation within one category as outlined on the information page.

List relay events on the relay page

Cross Country Skiing Registration Form

RELAY TEAMS

Registration Due: February 2, 2026

Local Program Name:

Local Program Coordinator:

List HEAD Coach Information Below

First/Last Name	Type	Cell Phone	Email Address
	HEAD Coach		

Athletes are restricted to participation within one category as outlined on the information page.

List only relay events on this page with team name and score for each team.

Catetory	First/Last Name	DOB	M/F	Type	Event	Team Name
						Team Score

Cross Country Skiing Registration Form

RELAY TEAMS

Registration Due: February 2, 2026

Local Program Name:

Local Program Coordinator:

List **HEAD** Coach Information Below

First/Last Name	Type	Cell Phone	Email Address
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	HEAD Coach		
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Athletes are restricted to participation within one category as outlined on the information page.

List only relay events on the this page with team name and score for each team.

Category	First/Last Name	DOB	M/F	Type	Event	Team Name
						Team Score

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 (3:1) is adhered to.

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.

Additional Personnel		Local Program:				
		List <u>ONLY</u> 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 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 until TWO WEEKS prior to the event
Participants added to your delegation MUST have all necessary paperwork on file at SOCT**

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

2026 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 2025 Winter Games. Please plan accordingly!!

	Alpine	Snowshoe	Cross Country	F. Skating	S. Skating
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)