



**Special Olympics Wisconsin
Sports Management Team
Application**

Name:	Phone:
Address 1	Bus. Phone:
Address 2	email:
City	State
Zip	Agency Name/ Number

Thank you for choosing to apply for membership on a Special Olympics Wisconsin (SOWI) Sports Management Team (SMT). A Chair will be chosen for each team who will then help to coordinate selection of members, report on team progress. SMT members will be chosen based on experience, and the needs of each team. Selection of Management Teams will begin on January 15th, 2005 and will continue until all positions are filled.

What is a Sports Management Team? An SMT is a resource group that will assist SOWI in managing the various functional aspects of offering a sport (recruiting/ training officials, recruiting/ training clinicians, managing competition, acting as a resource for SOWI coaches, etc). Management Team members need not have experience in each area, and need not participate in each of the functional areas. Rather, team will assist with the overall management of the sport as a group effort.

How much time is involved? Our goal is to minimize the amount of time required for Management Team membership. Management Teams will be asked to participate in one annual planning meeting per program year. Additional meetings will be based on need and will be determined by the SMT itself (no more that 1-2 additional meetings per year).

Please Tell us more about yourself:

I am currently Class A/B Registered with SOWI? Yes___ No___

Please select the Sports Management Team(s) that you are interested in and rank them in order of preference.

Fall Sports	Winter Games	Indoor Sports
Bowling ___	Alpine Skiing ___	Gymnastics ___
Volleyball ___	Speedskating ___	Basketball (Team and Skills) ___
	Snowshoeing ___	
	Snowboarding ___	
	Cross Country Skiing ___	
Summer Games	Outdoor Sports	
Athletics ___	Softball ___	
Soccer (Football) ___	Tennis ___	
Powerlifting ___	Golf ___	
Aquatics ___	Bocce ___	
	Cycling ___	

For which position(s) do you currently volunteer? (Check all that apply)

Coach ___	Official ___	Agency Manager ___
Parent ___	Day-of Volunteer ___	Games Management Team ___
Athlete ___	Other ___	

Which Special Olympics Sport Certifications do you currently hold?:

Fall Sports

Bowling ___
Volleyball ___

Winter Games

Alpine Skiing ___
Speedskating ___
Snowshoeing ___
Snowboarding ___
Cross Country Skiing ___

Indoor Sports

Gymnastics ___
Basketball (Team and Skills) ___

Summer Games

Athletics ___
Soccer (Football) ___
Powerlifting ___
Aquatics ___

Outdoor Games

Softball ___
Tennis ___
Golf ___
Bocce ___
Cycling ___

Misc.

MATP ___
Principles of Coaching ___
Official ___

Experience:

Please list any non-Special Olympics certifications that you currently hold:

Please describe your Special Olympics experience (Years of service, Coaching, event management, etc):

Please describe your sports experience outside of Special Olympics (certifications held, event management, coaching, sports participation, etc):

Misc. Sports Information:

Would you be willing to help with any of the following?:

- Recruiting/ training Officials? Yes___ No___
- Developing Training Materials? Yes___ No___
- Finding/ Securing Facilities and Equipment? Yes___ No___
- Recruiting/ Training Clinicians Yes___ No___
- Conducting Training Schools Yes___ No___
- Acting as the Chair of an SMT? Yes___ No___