

2016 INDOOR SPORTS SEASON OVERVIEW

EVENT DESCRIPTIONS

ATHLETES CAN ONLY BE ENTERED IN ONE SPORT

OFFICIAL EVENTS OFFERED:

1. BASKETBALL

<i>Event Code</i>	<i>Event Description</i>
BBINSC1	Individual Skills level 1
BBINSC2	Individual Skills level 2
BBTEAM	Team Basketball

2. GYMNASTICS – STATE LEVEL ONLY

A. GYMNASTICS – ARTISTIC

<i>Event Code</i>	<i>Event Description</i>
GYAVAU	Vaulting – Level A
GYAWBM	Wide Beam – Level A
GYAFLX	Floor Exercise – Level A
GYMFLX1	Men's Floor Exercise – Level 1
GYMFLX2	Men's Floor Exercise – Level 2
GYMFLX3	Men's Floor Exercise – Level 3
GYMVAU1	Men's Vaulting – Level 1
GYMVAU2	Men's Vaulting – Level 2
GYMVAU3	Men's Vaulting – Level 3
GYMHBR1	Men's Horizontal Bar – Level 1
GYMHBR2	Men's Horizontal Bar – Level 2
GYWVAU1	Women's Vaulting – Level 1
GYWVAU2	Women's Vaulting – Level 2
GYWVAU3	Women's Vaulting – Level 3
GYWUNB1	Women's Uneven Bars – Level 1
GYWUNB2	Women's Uneven Bars – Level 2
GYWUNB3	Women's Uneven Bars – Level 3
GYWBBM1	Women's Balance Beam – Level 1
GYWBBM2	Women's Balance Beam – Level 2
GYWBBM3	Women's Balance Beam – Level 3
GYWFLX1	Women's Floor Exercise – Level 1
GYWFLX2	Women's Floor Exercise – Level 2
GYWFLX3	Women's Floor Exercise – Level 3
GYWALL1	Women's All Around – Level 1
GYWALL2	Women's All Around – Level 2
GYWALL3	Women's All Around – Level 3

B. GYMNASTICS – RHYTHMIC

<i>Event Code</i>	<i>Event Description</i>
GYRROPA	Rope – Level A
GYRHOOA	Hoop – Level A
GYRRIBA	Ribbon – Level A
GYRBALLA	Ball – Level A
GYRALLA	All Around – Level A
GYRROPB	Rope – Level B
GYRHOOB	Hoop – Level B
GYRRIBB	Ribbon – Level B
GYRBALB	Ball – Level B
GYRBALLB	All Around – Level B
GYRROP1	Rhythmic Rope – Level 1
GYRCLB2	Rhythmic Club – Level 2
GYRROP3	Rhythmic Rope – Level 3
GYRHOO1	Rhythmic Hoop – Level 1
GYRHOO2	Rhythmic Hoop – Level 2
GYRCLB3	Rhythmic Club – Level 3
GYRBAL1	Rhythmic Ball – Level 1
GYRBAL2	Rhythmic Ball – Level 2
GYRBAL3	Rhythmic Ball – Level 3
GYRRIB1	Rhythmic Ribbon – Level 1
GYRRIB2	Rhythmic Ribbon – Level 2
GYRRIB3	Rhythmic Ribbon – Level 3
GYRALL1	Rhythmic All Around – Level 1
GYRALL2	Rhythmic All Around – Level 2
GYRALL3	Rhythmic All Around – Level 3

2016 INDOOR SPORTS SEASON

ELIGIBILITY FOR INDOOR SPORTS SEASON PARTICIPATION

1. Valid Special Olympics Release Form, Application For Participation in Special Olympics on file in the Headquarters office postmarked by **February 1, 2016** to remain valid through **April 10, 2016**
2. Teams must play a minimum of two documented games against other Special Olympics teams prior to registration for district/regional competition. The team roster must remain the same for the two qualifying games, district/regional competition, sectional competition and State competition. Teams that modify their rosters will forfeit all games. Qualifying games must be played against other teams with an Intent to Play form on file. One game must be played against a team from another Agency. Forfeited games do not count toward the scrimmage requirement.
3. Athletes must have participated in at least eight weeks of official Special Olympics training prior to State competition.
4. Individual basketball skills state participation will be based on a quota.
5. Teams must place first in their assigned district/regional competition to automatically qualify for sectional competition. Note: A limited number of second and third place teams will advance through lottery selections to fill spaces in the sectional tournament field.
6. Teams must place first in their assigned sectional competition to automatically qualify for State tournament play. Note: A limited number of second and third place teams will advance through lottery selections to fill any spaces in the State tournament field.
7. Each Agency must fill out an Intent to Play form and have it on file with the Regional office by **December 1, 2015**.
8. SOWI will issue a quota to each Agency for state basketball skills participation based on the current year's Regional involvement. Every Agency must follow the advancement criteria as described in the General Information section of the Competition Guide for determination of which athletes to advance.

PLEASE READ FORMS CAREFULLY!

2016 DISTRICT/REGIONAL BASKETBALL REGISTRATION TEAM BASKETBALL

Please Print Clearly:

Agency Number: _____ Agency Name: _____

**Head Coach: _____ W: (____) _____ H: (____) _____

Address: _____

Fax: (____) _____ E-mail: _____ (City) _____ (State) _____ (Zip) _____

Cell phone contact number while at the Tournament: (____) _____

RETURN THIS FORM TO THE HOST REGIONAL OFFICE BY THE PUBLISHED DEADLINE DATE!

I have verified that all chaperones attending the tournament are
approved SOWI Class A certified volunteers (check .

Team Name: |_| |_| |_| |_| |_| |_| |_| |_| |_| |_| |_| |_| |_| |_| |_| |_| |_|

Each team must have a unique name, up to **15 characters long**. This name will be used at all competitions.

CHECK ALL ITEMS:

New Team Existing Team

	ATHLETE NAMES (ALPHABETICAL: LAST NAME, FIRST)	M/F	HEIGHT
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

One team per form

**Registration information for this event will be sent to the person listed as head coach.

**By submitting this form I verify that the athletes on this roster competed in at least two of the
documented qualifying games (check .**

(OVER)

2016 DISTRICT/REGIONAL TEAM BASKETBALL

Please Print Clearly:

Agency Number: _____ Agency Name: _____

Team Name: _____

Total Agency number of coaches and chaperones that will be attending this district tournament: _____

***Reminder:** athlete to coaches/chaperone ratio is minimum of 4:1*

Will you be taking qualifying team(s) to the sectional tournament? Yes No

LIST ALL BASKETBALL GAMES PLAYED THIS SEASON.

(A minimum of **TWO GAMES** must be documented here **before** the registration deadline date. **ONE** game must be played against a team from another Special Olympics Agency.)

****Remember – the more information you give us, the more accurate your divisioning****

AGENCY NUMBER	OPPOSING TEAM OFFICIAL NAME	DATE OF GAME	YOUR SCORE	THEIR SCORE
Comments:				
Comments:				
Comments:				
Comments:				

2016 DISTRICT BASKETBALL SKILLS REGISTRATION ATHLETE ROSTER

Please Print Clearly:

Agency Number: _____ Agency Name: _____

***Head Coach: _____ W: (_____) _____ H: (_____) _____

Address: _____
(City) (State) (Zip)

Fax: (_____) _____ E-mail: _____

Cell phone contact number while at the Tournament: (_____) _____

RETURN THIS FORM TO THE HOST REGIONAL OFFICE BY THE PUBLISHED DEADLINE DATE!

I have verified that all chaperones attending the tournament are
approved SOWI Class A certified volunteers (check).

Number of coaches and chaperones that will attend this district tournament: _____

Reminder: athlete to coaches/chaperone ratio is minimum of 4:1

Will you be taking qualifying athletes to the state tournament? Yes No

	ATHLETE NAMES (ALPHABETICAL: LAST NAME, FIRST)	EVENT CODE	*QUALIFYING SCORE	BASKETBALL HOOP HEIGHT*	BASKETBALL SIZE MEN/WOMEN**
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					

*Refer to basketball skills rules to calculate final score to use as qualifying score.

**Refer to the rules for hoop height and ball size by age group.

***Registered information for this district event will be sent to the person listed as head coach.

2016 SECTIONAL TEAM BASKETBALL REGISTRATION ATHLETE ROSTER

Please Print Clearly:

Agency Number: _____ Agency Name: _____

Head Coach: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Fax: (_____) E-mail: _____

Cell phone contact number while at the Tournament: (_____)

RETURN THIS FORM TO YOUR HOST REGIONAL OFFICE BY THE PUBLISHED DEADLINE DATE!

I have verified that all chaperones attending the tournament are
approved SOWI Class A certified volunteers (check .

Team Name: | |_| |_| |_| |_| |_| |_| |_| |_| |_| |_| |_| |_| |_| |_| |_|

Each team must have a unique name up to **15 characters long**. This name will be used at all competitions.

List in Alphabetical Order

	ATHLETE NAME (ALPHABETICAL: LAST NAME, FIRST)	M/F	HEIGHT
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			