

# 2016-2017 EVENT CODES

## FALL SPORTS SEASON

### BOWLING

|        |   |
|--------|---|
| BOSING | Singles (one person)                      |
| BODBLE | Doubles (two person)                      |
| BOSINR | Singles – Ramp (one person)               |
| BOTEAM | Team Bowling (four person)                |
| BWLDEV | Developmental Singles & Ramp (one person) |

### VOLLEYBALL

|        |                  |
|--------|------------------|
| VBTEAM | Team Competition |
|--------|------------------|

### FLAG FOOTBALL

|         |                            |
|---------|----------------------------|
| FFTEAM  | Flag Football Team         |
| FFTEAMU | Unified Flag Football Team |

## WINTER SPORTS SEASON

### ALPINE SKIING

|        |                                  |
|--------|----------------------------------|
| ASINSL | Alpine Intermediate Slalom       |
| ASINGS | Alpine Intermediate Giant Slalom |
| ASINSG | Alpine Intermediate Super G      |
| ASSUGL | Alpine Super Glide               |

### CROSS COUNTRY SKIING

|         |                      |
|---------|----------------------|
| CC050M  | 50m Race Classical   |
| CC100M  | 100m Race Classical  |
| CC500MF | 500m Race Freestyle  |
| CC1KLMF | 1km Race Freestyle   |
| CC25KMF | 2.5km Race Freestyle |
| CC5KLMF | 5km Race Freestyle   |
| CC75KMF | 7.5km Race Freestyle |
| CC4X5M  | 4X500m Relay         |

### SNOWSHOE RACING

|          |              |
|----------|--------------|
| SN050M   | 50m Race     |
| SN100M   | 100m Race    |
| SN200M   | 200m Race    |
| SN400M   | 400m Race    |
| SN800M   | 800m Race    |
| SN4X100M | 4X100m Relay |
| SN4X200M | 4X200m Relay |
| SN4X400M | 4X400m Relay |

### SNOWBOARDING

|        |                                     |
|--------|-------------------------------------|
| SBSUGL | Snowboard Super Glide               |
| SBINSG | Snowboard Intermediate Super G      |
| SBINSL | Snowboard Intermediate Slalom       |
| SBINGS | Snowboard Intermediate Giant Slalom |

## INDOOR SPORTS SEASON

### BASKETBALL

|         |                           |
|---------|---------------------------|
| BBINSC1 | Individual Skills level 1 |
| BBINSC2 | Individual Skills level 2 |
| BBTEAM  | Team Basketball           |

### GYMNASTICS – RHYTHMIC

|          |                               |
|----------|-------------------------------|
| 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       |
| GYRHO01  | Rhythmic Hoop – Level 1       |
| GYRHO02  | 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 |

### GYMNASTICS – ARTISTIC

|         |                                  |
|---------|----------------------------------|
| 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     |

## SUMMER SPORTS SEASON

### ATHLETICS

|          |  |
|----------|--|
| AT50MDEV | Assisted Run (Regional only, non-advancing)  |
| AT050M   | 50m run                                      |
| AT100M   | 100m Run                                     |
| AT200M   | 200m Run                                     |
| AT400M   | 400m Run                                     |
| AT800M   | 800m Run                                     |
| AT1500M  | 1500m Run                                    |
| AT3000M  | 3000m Run                                    |
| AT25MW   | 25m Walk                                     |
| AT100W   | 100m Walk                                    |
| AT200W   | 200m Walk                                    |
| AT400W   | 400m Walk                                    |
| AT800W   | 800m Walk                                    |
| AT1500W  | 1500m Walk                                   |
| ATLNJP   | Long Jump (Must be able to jump at least 1m) |
| ATSTLJ   | Standing Long Jump                           |
| ATSP2M   | Shot Put-Male: 8-11 years of age             |
| ATSP4M   | Shot Put-Male: 12 years and older            |
| ATSPIW   | Shot Put-Female: 8-11 years of age           |
| ATSP2W   | Shot Put-Female: 12 years and older          |
| ATSOBT   | Softball Throw (cannot do with mini javelin) |
| ATJAVJR  | Mini Javelin 8-15                            |
| ATJAVSR  | Mini Javelin 16+                             |
| AT4X100W | 4x100m Walking Relay                         |
| AT4X100M | 4 x 100m Relay                               |
| AT4X200M | 4 x 200m Relay                               |
| AT4X400M | 4 x 400m Relay                               |
| AT25WH   | Wheelchair-25m                               |
| AT100WH  | Wheelchair-100m                              |
| AT200WH  | Wheelchair-200m                              |
| AT30WS   | Wheelchair-30m Slalom                        |
| ATWHOB   | Motor Wheelchair-25m Obstacle                |
| AT30MS   | Motor Wheelchair-30m Slalom                  |
| AT50MS   | Motor Wheelchair-50m Slalom                  |
| AT4X25M  | 4 x 25 Wheelchair Shuttle Relay              |
| ATWSP1M  | Wheelchair Shot Put-Male                     |
| ATWSP1W  | Wheelchair Shot Put-Female                   |

### POWERLIFTING

|         |                                 |
|---------|---------------------------------|
| PLBHPR  | Bench Press                     |
| PLDEAD  | Deadlift                        |
| PLSQAT  | Squat                           |
| PLCOMB2 | Bench/Deadlift Combination Lift |
| PLCOMB3 | Bench/Deadlift/Squat Combo Lift |

### SOCCER

|        |                         |
|--------|-------------------------|
| FBTEAM | Five-A-Side Team Soccer |
|--------|-------------------------|

## AQUATICS

|          |  |
|----------|--|
| SW25MDEV | Assisted Swim (District only, non-advancing)     |
| SW15WK   | 15m Walk (District only, if water depths permit) |
| SW15KB   | 15m Kickboarding (District Only, non-advancing)  |
| SW15US   | 15m Unassisted Swim                              |
| SW25MF   | 25m Freestyle                                    |
| SW50MF   | 50m Freestyle                                    |
| SW100MF  | 100m Freestyle                                   |
| SW200MF  | 200m Freestyle                                   |
| SW400MF  | 400m Freestyle                                   |
| SW25BS   | 25m Breaststroke                                 |
| SW50BS   | 50m Breaststroke                                 |
| SW100BS  | 100m Breaststroke                                |
| SW25BK   | 25m Backstroke                                   |
| SW50BK   | 50m Backstroke                                   |
| SW100BK  | 100m Backstroke                                  |
| SW25BF   | 25m Butterfly                                    |
| SW50BF   | 50m Butterfly                                    |
| SW100BF  | 100m Butterfly                                   |
| SW100IM  | 100m Individual Medley                           |
| SW4X25MF | 4x25m Freestyle Relay                            |
| SW4X50MF | 4x50m Freestyle Relay                            |
| SW4X1CMF | 4x100m Freestyle Relay                           |
| SW4X25MR | 4x25m Medley Relay                               |
| SW4X50MR | 4x50m Medley Relay                               |

## OUTDOOR SPORTS SEASON

### BOCCE

|        |                  |
|--------|------------------|
| BCTEAM | Team Competition |
|--------|------------------|

### GOLF

|         |   |
|---------|---|
| GFASTM  | Alternate Shot Team Play – Level 2        |
| GFSING9 | Individual Stroke Play (9 Hole) – Level 4 |

### SOFTBALL

|        |                           |
|--------|---------------------------|
| SBTEAM | Team Softball Competition |
|--------|---------------------------|

### TENNIS

|        |         |
|--------|---------|
| TNSING | Singles |
|--------|---------|

# **2016 STATE BOWLING TOURNAMENTS**

## **EVENT DESCRIPTION**

### **OFFICIAL EVENTS OFFERED:**

#### **1. BOWLING**

| <i>Event Code</i> | <i>Event Description</i>                  |
|-------------------|---|
| BOSING            | Singles (one person)                      |
| BODBLE            | Doubles (two person)                      |
| BOSINR            | Singles – Ramp (one person)               |
| BOTEAM            | Team Bowling (four person)                |
| BWLDEV            | Developmental Singles & Ramp (one person) |

### **ELIGIBILITY FOR STATE BOWLING TOURNAMENT PARTICIPATION**

1. Valid Official Special Olympics Release Form and Application for Participation in Special Olympics on file in the Headquarters office postmarked by to **October 1, 2016** to remain valid through **date of the State Bowling Tournament you are attending**.
2. A bowling scratch score is based on a 15-game average submitted to the Regional office along with any other registration information prior to the deadline date for a Regional tournament. (The 15-game average can be based on any documented games which have taken place since the completion of last year's State bowling tournament.)
3. Athletes must place first, second or third at a regional tournament to be eligible to advance to the State bowling tournaments. Teams missing a player may not advance.

### **COST:DELEGATES ARE THE ATHLETES, COACHES AND CHAPERONES**

Plan C: Day Of: \$8.00 per delegate

## REGISTRATION FORMS MUST BE SUBMITTED TO THE TOURNAMENT HOST:

### NORTHWESTERN TOURNAMENT

November 12, 2016  
Weston Lanes – Weston  
Regions 2 & 3  
Host: Region 2  
Ellen Daniels  
edaniels@specialolympicswisconsin.org  
715-848-0550  
715-848-0880 *fax*

### NORTHEASTERN TOURNAMENT

November 13, 2016  
Ashwaubenon Lanes- Green Bay  
Willow Creek Lanes – Green Bay  
Regions 4 & 5  
Host: Region 5  
Carla Lieb  
clieb@specialolympicswisconsin.org  
920-497-2422  
920-497-0126 *fax*

### SOUTHWESTERN TOURNAMENT

November 13, 2016  
Bowl-A-Vard Lanes – Madison  
Prairie Lanes – Sun Prairie  
Regions 6 & 7(western)  
Host: Region 6  
Kate Bergmann  
kbergmann@specialolympicswisconsin.org  
608-442-5679  
608-222-3578 *fax*

### SOUTHEASTERN TOURNAMENT

November 13, 2016  
Bowlero Lanes - Wauwatosa  
Region 7(eastern) & 8  
Host: Region 8  
Jason Blank  
jblank@specialolympicswisconsin.org  
262-241-7786  
262-241-5334 *fax*

# **State Games Registration Checklist**

Please take the time to go through this checklist when filling out your registrations. This will help prevent mistakes and help process your registration faster.

*This checklist is meant to be a useful tool to help you with games registrations and may not be an all-encompassing list. Please make sure to review rules and policies for each sport and game.*

## **Contact Information:**

- ☐ Enter contact information for person who will be receiving all email and mailings regarding tournament information
- ☐ Head of Delegation name and contact
  - Enter contact information for person who will be **attending** the games that we can contact regarding weather information, tournament changes, lost athletes, etc.

## **Checklist of Enclosures and Delegate Numbers:**

- ☐ Check boxes next to which materials you are including in the registration packet
- ☐ Confirm all materials are included in the packet when registering
- ☐ Make sure correct number of athletes without wheelchairs, with wheelchairs, and coaches/chaperones (separated by gender) is entered and added up correctly.

## **Registration Fees:**

- ☐ Enter correct number of delegates into the correct registration plan and total monetary amount.
- ☐ If dividing your agency between two plans
  - Make sure you fill out two separate registration packets!
  - Each registration packet must have a separate Head of Delegation
- ☐ Check the box next to how your agency will be paying for the games fees – In-House Account or Non In-House Account

## **Housing and Meals:**

- ☐ Enter correct amount of housing needed separated out by gender
- ☐ Enter the correct number of meals you will need. If you will not be taking meals, please enter “0”
- ☐ Enter correct number of *optional* meals (ex: Sunday Lunch) you will need. *Be sure any associated fees are included in your total*

## **Agency Manager Signature:**

- ☐ Please sign or type (if filling out electronically) name and date.

## **Coach/Chaperone Roster:**

- ☐ Enter in names and gender of all Certified Coaches and Chaperones attending the Games
- ☐ Check if they will be needing housing, in a wheelchair, or an Athlete as Coach (AAC).
- ☐ CONFIRM:
  - All coaches are current class A Volunteers and have completed the General Coach's Orientation
  - All chaperones are current class A Volunteers
- ☐ If questions regarding class A or coach certification status, please contact your Regional Athletic Director or Volunteer Records Manager (608-442-5675)

**(continue next page)**

**Athlete Rosters:**

- ☐ Fill out rosters for all sports you will be competing in at the Games.
- ☐ Confirm
  - All athlete names entered and all events they will be participating entered
  - Check boxes if they will be needing housing
  - Any additional information on registration (ex: water start for aquatics, category letter for athletics)
- ☐ Medicals
  - Confirm all athlete medicals are current for the Games.
  - Any questions regarding medical status of athletes, please contact your Regional Athletic Director or our Athlete Records Manager (608-442-5677)
- ☐ Special Needs Forms
  - Submit Special Needs Forms for any athlete needing this (ex: non-verbal, behavior issues, etc). *Special Needs Forms must be submitted separate for each level of competition.*

**Athlete to Chaperone Ratio:**

- ☐ Confirm that you are following the 3:1-4:1 ratio for your registration packet
  - If dividing between two registration plans, this ratio must be followed for each packet
- ☐ Special Needs forms for athletes requesting 1:1 chaperones filled out and sent in with registration packet.
- ☐ If requesting 1:1 Chaperones for any of your athletes, take those athletes and chaperones out of your numbers and confirm your ratio still fits for the remaining athletes and coaches/chaperones.

**Uniforms:**

- ☐ Verify that all athletes have legal uniforms
  - Refer to the individual sport rules and the Uniform Requirements located in the appendices of the Competition Guide

# 2016 STATE BOWLING TOURNAMENT REGISTRATION FORMS AND FEES CHECKLIST

**Please Print Clearly:**

Agency Number: \_\_\_\_\_ Agency Name: \_\_\_\_\_

**Important:** Material will only be sent to individual listed below. Be sure the address is correct (**no P.O. box Numbers**) and the form complete.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone H: (\_\_\_\_\_) \_\_\_\_\_ Phone W: (\_\_\_\_\_) \_\_\_\_\_

Fax: (\_\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

**Head of Delegation (HOD) at the Games:** \_\_\_\_\_

**HOD cell phone contact number while at the Games:** (\_\_\_\_\_) \_\_\_\_\_

**RETURN THIS FORM TO THE REGIONAL OFFICE WITH STATE REGISTRATION MATERIALS  
BY THE DEADLINE DATE!**

| CHECKLIST OF ENCLOSURES: |                        | DELEGATES:                        |  | TOTAL NUMBER    |
|--------------------------|------------------------|-----------------------------------|--|-----------------|
| <input type="checkbox"/> | Chaperone Roster       | Male Athletes (w/o wheelchairs)   |  |                 |
| <input type="checkbox"/> | Registration Fees      | Male Athletes w wheelchairs       |  | <b>SUBTOTAL</b> |
| <input type="checkbox"/> | Bowling Athlete Roster | Male Coaches / Chaperones         |  |                 |
|                          |                        | Female Athletes (w/o wheelchairs) |  |                 |
|                          |                        | Female Athletes w wheelchairs     |  | <b>SUBTOTAL</b> |
|                          |                        | Female Coaches / Chaperones       |  |                 |
|                          |                        | <b>TOTAL M + F DELEGATES</b>      |  |                 |

**REGISTRATION FEES**

Plan C: Day Of: competition \$ 8.00 x \_\_\_\_\_ Total Delegates = \$ \_\_\_\_\_

☐ In-House Account (Funds will be automatically transferred)

☐ Non In-House Accounts: Check # \_\_\_\_\_

☐ Included in Packet

☐ Will Send to SOWI

Date: \_\_\_\_\_

**“I have checked this information and found it to be complete and accurate.”**

\_\_\_\_\_  
Agency Manager Signature Date

\_\_\_\_\_  
Regional Office Signature Date

## COACH – CHAPERONE ROSTER

AGENCY # \_\_\_\_\_

Please list the coaches and chaperones who will be accompanying your group. You must adhere to an athlete/chaperone ratio that is between 3:1 and 4:1. Prior approval must be received from your Regional office for other athlete/coach ratios.

### IMPORTANT

Chaperones must be 16 years of age or older. No un-named chaperones are allowed. All chaperones must be approved, active SOWI Class A volunteers by the entry deadline date.

Athletes-As-Coaches (AAC) are to be listed under CERTIFIED COACHES.. The AAC athletes-to-athlete ratio is one per team sport (excluding bocce, relay teams and bowling teams) and one per every 12 athletes in the individual sports (including bocce, relay teams and bowling teams). Please indicate any Athletes-As-Coaches by checking the box in the AAC column.

The roster must be typed or printed clearly.

| CERTIFIED COACHES |  | M / F | W/C [X]                  | AAC [X]                  |
|-------------------|--|-------|--------------------------|--------------------------|
| 1.                |  |       | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.                |  |       | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.                |  |       | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.                |  |       | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.                |  |       | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.                |  |       | <input type="checkbox"/> | <input type="checkbox"/> |
| 7.                |  |       | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.                |  |       | <input type="checkbox"/> | <input type="checkbox"/> |

| CHAPERONES |  | M / F | W/C [X]                  |
|------------|--|-------|--------------------------|
| 1.         |  |       | <input type="checkbox"/> |
| 2.         |  |       | <input type="checkbox"/> |
| 3.         |  |       | <input type="checkbox"/> |
| 4.         |  |       | <input type="checkbox"/> |
| 5.         |  |       | <input type="checkbox"/> |
| 6.         |  |       | <input type="checkbox"/> |
| 7.         |  |       | <input type="checkbox"/> |
| 8.         |  |       | <input type="checkbox"/> |

**"I verify that all coaches and chaperones in attendance are 16 years of age or older and are Class A approved. In addition, all Athletes-As-Coaches listed above meet the criteria for the AAC Program."**

Agency Manager Signature

Date



# **2016 STATE BOWLING TOURNAMENTS**

## **BOWLING ATHLETE ROSTER**

**Please Print Clearly:**

Agency Number: \_\_\_\_\_ Agency Name: \_\_\_\_\_

Head Coach: \_\_\_\_\_ Cell #: \_\_\_\_\_

**RETURN THIS FORM TO YOUR REGIONAL OFFICE WITH STATE REGISTRATION MATERIALS  
BY PUBLISHED DEADLINE DATE!**

**Please Note:**

1. Athletes must be listed in alphabetical order by last name.
2. Athletes can only participate in one event.

|     | <b>ATHLETE NAME</b><br>(LAST NAME, FIRST NAME) | <b>M/F</b> | <b>WHEELCHAIR [X]</b>    | <b>EVENT CODE</b> |
|-----|--|------------|--------------------------|-------------------|
| 1.  |  |            | <input type="checkbox"/> |                   |
| 2.  |  |            | <input type="checkbox"/> |                   |
| 3.  |  |            | <input type="checkbox"/> |                   |
| 4.  |  |            | <input type="checkbox"/> |                   |
| 5.  |  |            | <input type="checkbox"/> |                   |
| 6.  |  |            | <input type="checkbox"/> |                   |
| 7.  |  |            | <input type="checkbox"/> |                   |
| 8.  |  |            | <input type="checkbox"/> |                   |
| 9.  |  |            | <input type="checkbox"/> |                   |
| 10. |  |            | <input type="checkbox"/> |                   |
| 11. |  |            | <input type="checkbox"/> |                   |
| 12. |  |            | <input type="checkbox"/> |                   |
| 13. |  |            | <input type="checkbox"/> |                   |
| 14. |  |            | <input type="checkbox"/> |                   |
| 15. |  |            | <input type="checkbox"/> |                   |
| 16. |  |            | <input type="checkbox"/> |                   |
| 17. |  |            | <input type="checkbox"/> |                   |
| 18. |  |            | <input type="checkbox"/> |                   |
| 19. |  |            | <input type="checkbox"/> |                   |
| 20. |  |            | <input type="checkbox"/> |                   |