AGENCY INFORMATION

Agency Type:CommunityDate From:1976Address1:W940 Sawyer AveAddress2:Address1:ViiaCity:WitheeState:WiZp:54408Business Phone:Tors7157480164Cell Phone:715-383-5476Fax:Agency Manager:Katie FreudenthalManager Date From:4/03/2013Manager Email:tespecialolympics@gmail.comCo Manager Date From:4/03/2013Co Manager Date From:tespecialolympics@gmail.comCo Manager Date From:1005/2016Treasurer Name:Bruce PoehlerTreasurer Date From:1005/2016Treasurer Email:chezney@tds.netFundraiser Name:1005/2016Medical Records Name:Sandy PoehlerModical Records Date From:1005/2016Medical Records Name:NoAccepting New Athletes:NoAccepting New Athletes:Medical Records Famil:VesAccounts In House:YesMudrissing Another Org:YesSocepting New Athletes:YesNovboarding:FastRiviting Sander:YesAquetos:YesSander Sander:YesSoccer:YesGolf:YesSocter:Socier:Golf:YesSottalit:YesGolf:YesAgreenent:New Infined Sastedal:YesAuditos:YesGolf:YesSocter:YesGolf:YesSocter:YesGolf:YesSottalit:YesGolf: <t< th=""><th>Agency Number:</th><th>2-20</th><th>Agency Name:</th><th>Golden Eagles</th></t<>	Agency Number:	2-20	Agency Name:	Golden Eagles
Address1.City:WitheAddress3.City:WitheState:WiZip:54498Business Phone:Y1574801647157480164Cell Phone:7157483-5476Fax:7157480164Cell Phone:T15383-5476Fax:403/2013Agency Manager:Katie FreudenthalManager Date From:403/2013Manager Date From:tsspecialolympics@gmail.comCo Manager:*********************************	Agency Type:	Community	Date From:	1976
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state: An of the second secon	Address3:		City:	Withee
Business Priorie: 715-383-5476 Fax: Agency Manager: Katie Freudenthal Manager Date From: 4/03/2013 Manager Email: tcspecialolympics@gmail.com Co Manager: ************************************	State:	Wi	Zip:	54498
Agency Manager: Katie Freudenthal Manager Date From: 4/03/2013 Manager Email: tcspecialolympics@gmail.co Co Manager: : Co Manager Email: tcspecialolympics@gmail.co Co Manager: : Co Manager Date From: Fruce Poehler Treasurer Date From: 10/05/2016 Treasurer Email: ohezney@tds.net Fundraiser Date From: 10/05/2016 Fundraiser Date From: Fundraiser Email: ' Medical Records Name: Sandy Poehler Medical Records Date From: 10/05/2016 Medical Records Email: chezney@tds.net Athetes Served: Both Accepting New Athletes: Yes Yes Sendy Poehler Fundraising Another Org: No Fundraising Org Name: - Alpine Skilng: Yes Snowshoe Racing: Yes Snowboarding: Snowshoe Racing: Yes Aquatics: Yes Yes Aquatics: Yes Seccer: Soccer: Goff: Seccer: Softball: Tee Ball: Seccer: Softball: Yes Seccer: Yes Soldtball: Yes Seccer: Yes Soldtball: Yes Seccer: Yes Sof	Business Phone:		Home Phone:	7157480164
Agency wanager: tespecialolympics@gmail.com Co Manager: Manager Email: tespecialolympics@gmail.com Co Manager: Co Manager Date From: Bruce Poehler Treasurer Date From: 10/05/2016 Treasurer Email: chezney@tds.net Fundraiser Name: 10/05/2016 Fundraiser Date From: Fundraiser Email: 10/05/2016 Medical Records Name: Sandy Poehler Medical Records Date From: 10/05/2016 Medical Records Name: Sandy Poehler Medical Records Date From: 10/05/2016 Medical Records Name: Sandy Poehler Medical Records Date From: 10/05/2016 Medical Records Name: Sandy Poehler Medical Records Date From: 10/05/2016 Medical Records Name: Ves Accounts In House: Yes Fundraising Another Org: Yes Yes Yes Snowboarding: Snowshoe Racing: Yes Team Basketball: Yes Mathetes: Yes Aquatics: Yes Yes Yes Soccer: Goff: Yes Yes Soccer: Goff: Yes Yes Sottball: Yes Yes Yes Yoleyball: Flag Football: Yes Yes Yes	Cell Phone:	715-383-5476	Fax:	
Co Manager Date From: Co Manager Email: 10/05/2016 Treasurer Name: Bruce Poehler Treasurer Date From: 10/05/2016 Treasurer Email: chezney@tds.net Fundraiser Name: ID/05/2016 Fundraiser Date From: chezney@tds.net Fundraiser Email: 10/05/2016 Medical Records Name: Sandy Poehler Medical Records Date From: 10/05/2016 Medical Records Email: chezney@tds.net Athletes Served: Both Accepting New Athletes: Yes Accounts In House: Yes Fundraising Another Org: No Fundraising Org Name: Yes Alpine Skiing: Cross Country Skiing: Yes Snowboarding: Snowshoe Racing: Yes Team Basketball: Yes Rhythmic Gymnastics: Yes Aquatics: Yes Athletics: Yes Soccer: Golf: Soccer: Yes Sotthall: Tee Ball: Yes Volleyball: Flag Football: Yes Agreement: Yes Yes Volleyball: Yes Yes Soccer: Ye	Agency Manager:	Katie Freudenthal	Manager Date From:	4/03/2013
Treasurer Name:Bruce PoehlerTreasurer Date From:10/05/2016Treasurer Email:chezney@tds.netFundraiser Name:	Manager Email:	tcspecialolympics@gmail.com	Co Manager:	
Treasurer Email: check of the function of the fu	Co Manager Date From:		Co Manager Email:	
Fundraiser Date From: Fundraiser Email: Medical Records Name: Sandy Poehler Medical Records Date From: 10/05/2016 Medical Records Email: chezney@tds.net Athletes Served: Both Accepting New Athletes: Yes Accounts In House: Yes Fundraising Another Org: No Fundraising Org Name: Yes Alpine Skiing: Cross Country Skiing: Snowshoe Racing: Snowboarding: Snowshoe Racing: Yes Artistic Gymnastics: Yes Basketball Skills: Yes Aquatics: Yes Athletics: Yes Soccer: Powerlifting: Yes Yes Bocce: Golf: Softball: Yes Yes Bowling: Yes Yes Volleyball: Flag Football: Yes Yes Unified Basketball: Yes	Treasurer Name:	Bruce Poehler	Treasurer Date From:	10/05/2016
Medical Records Name:Sandy PoehlerMedical Records Date From:10/05/2016Medical Records Email:chezney@tds.netAthletes Served:BothAccepting New Athletes:YesAccounts In House:YesFundraising Another Org:NoFundraising Org Name:YesAlpine Skiing:Cross Country Skiing:Snowshoe Racing:Snowboarding:Snowshoe Racing:YesTeam Basketball:YesBasketball Skills:YesArtistic Gymnastics:Rhythmic Gymnastics:YesAquatics:Athletics:YesSoccer:EGoff:Soccer:Core:Tee Ball:Soccer:Fundiation:YesSoccer:Face Scounder Structure:Soccer:Face Scounder Structure: </td <td>Treasurer Email:</td> <td>chezney@tds.net</td> <th>Fundraiser Name:</th> <td></td>	Treasurer Email:	chezney@tds.net	Fundraiser Name:	
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Alpine Skiing: Cross Country Skiing: Snowboarding: Snowshoe Racing: Team Basketball: Yes Artistic Gymnastics: Rhythmic Gymnastics: Aquatics: Athletics: Soccer: Powerlifting: Bocce: Golf: Sottball: Tee Ball: Tennis: Yes Volleyball: Yes Agreement: Yes Unified Bocce: Unified Bowling:	Accepting New Athletes:	Yes	Accounts In House:	Yes
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Aquatics: Athletics: Yes Soccer: Powerlifting: Bocce: Golf: Softball: Tee Ball: Tennis: Bowling: Volleyball: Flag Football: Agreement: Yes Unified Bocce: Unified Bowling:	Team Basketball:	Yes	Basketball Skills:	Yes
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Softball: Tee Ball: Tennis: Bowling: Yes Volleyball: Flag Football: Agreement: Yes Volleyball: Unified Basketball: Unified Bocce: Unified Bowling:	Soccer:		Powerlifting:	
Tennis: Bowling: Yes Volleyball: Flag Football: Agreement: Yes Unified Bocce: Unified Bowling:	Bocce:		Golf:	
Volleyball: Flag Football: Agreement: Yes Unified Basketball: Unified Bocce: Unified Bowling:	Softball:		Tee Ball:	
Agreement: Yes Unified Basketball: Unified Bocce: Unified Bowling:	Tennis:		Bowling:	Yes
Unified Bocce: Unified Bowling:	Volleyball:		Flag Football:	
	Agreement:	Yes	Unified Basketball:	
Corn Hole: Sr Athletes Sports:	Unified Bocce:		Unified Bowling:	
-	Corn Hole:		Sr Athletes Sports:	

ADMINISTRATION

1.	The Local Program Manager has reviewed and understands the SOWI Local Program Guide and references appropriate sections to members of the Local Program Team.	Yes
2.	When signing contracts, the Local Program utilizes the Certificate of Insurance according to SOWI guidelines. (Checking N/A indicates the Agency does not sign contracts.)	Yes
3.	Local Program follows Special Olympics, Incorporated policies regarding athlete housing.	Yes
4.	Local Program understands the purpose of the SOWI Agency Management Committee (AMC) and knows how to contact their Region's representative.	Yes
5.	Local Program knows how to navigate and utilize the SOWI website, including how to access the Local Program log in, and where the Local Program Manager "SOWI Local Program Guide", Competition Guide, forms and other resources are located.	Yes

TRAINING AND VOLUNTEERS

1.	All volunteers (Local Program Managers, coaches, chaperones, etc.) are registered as Class A volunteers with SOWI according to the Special Olympics, Inc. volunteer registration policy including completing the Protective Behaviors, Class A Form, and background check online training.	No
2.	All certified coaches have completed the online General Coaches' Certification and all Class A Requirements.	Yes
3.	Local Program follows all SOWI policy relating to volunteers and roster accuracy in addition to the team or individual sport advancement to state-level competition (A certified coach must accompany each team or serve as the certified coach for one sport at the same State Tournament).	Yes
4.	Please report the total number of family members actively involved in a leadership role in your agency.	4
5.	Class A volunteers, Certified Coaches, and Athletes (including Unified Sports Partners) must adhere to their respective Code of Conduct.	Yes
6.	All training and competition facilities and equipment are safe and there is a first aid kit, up-to-date athlete medical information and emergency contact on hand, a phone and/or transportation available in case of an emergency. This information is to be provided by the coach if the athlete needs medical attention. It is recommended that coaches and chaperones carry this information at all times while at competitions.	Yes
7.	All athletes have a current Application for Participation in Special Olympics Form (Athlete Medical Form) and Official Special Olympics Release Form filed with SOWI State Office, prior to beginning training	Yes
8.	Does your Local Program offer any of the following fitness programming outside of the regular sports practices? (Check all that apply)	No
9.	What sport-specific training would you like to see offered in your region? *Please note this is only to gauge interest and does not guarantee that a training will be held in your region. (Check all that apply)	
10.	Questions / Concerns	

none

COMPETITION

1.	Local Program possesses, understands and utilizes the Competition section of the SOWI Local Program Guide.	Yes
2.	Athletes adhere to sports rules and competition policies.	Yes
3.	Coaches conduct themselves in a professional manner which reflects the SOWI mission and philosophy, adheres to sports rules and competition policies.	Yes
4.	Local Program is aware of USA Games and World Games opportunities for their athletes and coaches and understands how to nominate those that qualify.	Yes

FINANCE

1.	Local Program follows procedures and submits proper documents for petty cash, payables and deposits.	Yes
2.	Invoice Approval Form is signed by the Local Program Manager and one other member of the Local Program Management Team who are Class A volunteers without financial restrictions and are not family members of each other.	Yes
3.	Local Program understands and submits Sales Tax Reporting Form with deposits that include sales of taxable items within 30 days of the sale. (Checking N/A indicates Local Program does not conduct sales tax activities.)	Yes
4.	Local Program submits Money Handling Accountability form for all fundraisers at the time a deposit is made. (Checking N/A indicates the Local Program does not conduct fundraisers where cash is exchanged.)	Yes
5.	Local Program understands how to check its finances on the Local Program log in of the website and does so monthly. (Applies only if Local Program has in-house account.)	Yes

FUNDRAISING

1. The following question is only for Local Programs who conduct fundraisers in the name of Special Olympics Wisconsin: Local Program participates in state-sponsored fundraising events, many of which offer Local Program rebates.

\checkmark
Facility Rental (i.e., bowling lane fees, gym rental, etc.)
Equipment (i.e., basketballs, bats, etc.)
Uniforms
\checkmark
Transportation
State Games Fees
Other:

COMMUNICATION & PUBLIC RELATIONS

1.	Local Program official materials (i.e. stationary, event programs, ne standards layout as outlined by Special Olympics, Incorporated. (Ci has no official materials.)	, ,	Yes
2.	Local Program regularly communicates information to athletes, families, volunteers and sponsors. (The use of written communication is encouraged for all Local programs.)		Yes
	Newsletters	ESS	
	E-Mail		
	Facebook Group	Monthly	
	Website		
	Mail		
	Other:		
3.	Local Program has read and understands the SOWI Crisis Commun	ication Plan.	Yes
4.	Local Program's only form of social media is through a Facebook g (Checking N/A means the Local Program does not use social media		Yes
5.	Local Program flag or banner has the current Special Olympics logo standards must be met.	o. When ordering new materials,	Yes
6.	Local Program uniforms have the current Special Olympics logo. (C contain the Special Olympics logo.) When ordering new materials, s	-	Yes

OUTREACH

1.	Local Program does not discriminate on the basis of race, gender, religion, nationality, origin or political philosophy. (Checking "No" indicates your Local Program discriminates.)	Yes
2.	If Local Program has reached its full capacity and is unable to bring new athletes into the program, check yes. (If any Local Program has reached its full capacity, the Local Program refers the individual to the Region office.)	No
3.	Local Program is informing their parents about Healthy Athletes disciplines and/or making parents aware athletes can attend Healthy Athletes at State games without being registered for that State games.	Yes

Project UNIFY®*
\checkmark
Healthy Athletes®
Get Into It®*
Healthy Communities Mini-projects*
Spread the Word to End the Word®*
\checkmark
Unified Sports®*
Young Athletes™*

- ^{4.} Local Program is aware of Unified Leadership, and, if appropriate, places athletes in a position of leadership at the Local Program level.
- 5. Questions / Concerns

^{1.} Agency is aware of Athlete Leadership efforts and places athletes in position of leadership at the Agency level.

Yes

If you have athletes in these roles in 2020-2021, please list name and check all roles that apply: