AGENCY INFORMATION

Agency Type:SchoolDate From:80/12016Address1:121 Sales St.Address2:Address3:''Gity:MerrillState:WiZp:54452Business Phone:715-536-9593 ext.17108Home Phone:715-218-7206Gall Phone:715-218-7206Fax:''Agency Manager:I'mily Heckendorf@mapsadu/oOct Manager Date From:''Agency Manager Email:emily.heckendorf@mapsadu/oOct Manager Tall:''Yeasure Tassure From:''Cod Manager Date From:''Treasure Tassure Tassure From:''Fordraiser Date From:''Yeasure Email:''Fordraiser Date From:'' </th <th>Agency Number:</th> <th>2-21</th> <th>Agency Name:</th> <th>Merrill Public Schools</th>	Agency Number:	2-21	Agency Name:	Merrill Public Schools
Address1: Address2: Address3: City:: Mernill State: Wi Zip:: 5452 Business Phone: 715-536-5939 ext:17108 Home Phone: 714526-206 Cell Phone: 715-218-7206 Fax: 715-218-7206 Agency Manager: Emily Heckendof Manager Date From: 901/2023 Agency Manager Email: emily-heckendorf@mapseduor Co Manager Email: - Co Manager Date From: Co Manager Email: - - Treasurer Famail: - Fundraiser Name: - - Fundraiser Date From: Fundraiser Name: - - - - Fundraiser Date From: Fundraiser Mame: -	Agency Type:	School	Date From:	8/01/2016
Address:VitZip:64452State:ViZip:64452Business Phone:715-536-9593 ext.17108Home Phone:715-218-7206Cell Phone:T15-218-7206Fax:VitAgency Manager:Emily HeckendorfManager Date From:901/2023Manager Email:emily.heckendorf@mapseduceCo Manager:	Address1:	1201 Sales St.	Address2:	
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Business Friotie. 715-218-7206 Fax: 9/01/2023 Agency Manager: Emily Heckendof Manager Date From: 9/01/2023 Manager Email: emily.heckendof@mapseduorg Co Manager: :	State:	Wi	Zip:	54452
Call Profine: Fmily Heckendof Manager Date From: 9/01/2023 Agency Manager: Emily Heckendor/@mapseduo Co Manager Email:	Business Phone:	715-536-9593 ext.17108	Home Phone:	715-218-7206
Nanager Engli: emily.heckendorf@mapsedu.org Co Manager: Co Manager Engli: Co Manager Engli: Co Manager Engli: Treasurer Name: Treasurer Date From: Treasurer Date From: Treasurer Engli: Fundraiser Name: Fundraiser Name: Fundraiser Date From: Fundraiser Name: Fundraiser Date From: Fundraiser Date From: Fundraiser Served: Youth Medical Records Name: Medical Records Date From: Youth Medical Records Engli: Athletes Served: Youth Accepting New Athletes: Yes Yes Fundraising Another Org: No Fundraising Org Name: Yes Alpine Skiing: Cross Country Skiing: Yes Snowboarding: Snowshoe Racing: Yes Aquatics: Rhythmic Gymnastics: Yes Aquatics: Colf: Yes Soccer: Golf: Yes Softball: Tee Ball: Yes Volleyball: Flag Football: Yes Softball: Yes Yes Softball: Yes Yes Volleyball: Yes	Cell Phone:	715-218-7206	Fax:	
Co Manager Entail: Co Manager Enail: Treasurer Name: Treasurer Date From: Treasurer Enail: Fundraiser Name: Fundraiser Date From: Fundraiser Enail: Medical Records Name: Fundraiser Enail: Medical Records Name: Medical Records Date From: Medical Records Enail: Athletes Served: Youth Accepting New Athletes: Yes Yes Fundraising Another Org: No Fundraising Org Name: Alpine Skiing: Cross Country Skiing: Yes Snowboarding: Snowshoe Racing: Yes Aquatics: Rhythmic Gymnastics: Yes Aquatics: Colf: Yes Soccer: Powerlifting: Yes Soccer: Golf: Yes Softball: Tee Ball: Yes Softball: Tee Ball: Yes Softball: Yes Yes Softball: Flag Football: Yes Softball: Yes Yes Softball: Yes Yes Softball: Yes Yes Yes <td>Agency Manager:</td> <td>Emily Heckendof</td> <td>Manager Date From:</td> <td>9/01/2023</td>	Agency Manager:	Emily Heckendof	Manager Date From:	9/01/2023
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Treasurer Email: Fundraiser Name: Fundraiser Date From: Fundraiser Email: Medical Records Name: Medical Records Date From: Medical Records Email: Medical Records Date From: Medical Records Email: Medical Records Date From: Medical Records Email: Yes Medical Records Email: Yes Accepting New Athletes: Yes Pundraising Another Org: No Alpine Skling: Cross Country Skling: Yes Snowboarding: Snowshoe Racing: Yes Tream Basketball: Snowshoe Racing: Yes Artistic Gymnastics: Rhythmic Gymnastics: Yes Aquatics: Athletics: Yes Soccer: Powerlifting: Yes Bocce: Golf: Yes Softball: Tee Ball: Yes Volleyball: Flag Football: Yes Agreement: Yes Yes Medical Record: Yes Yes Volleyball: Inamote State	Co Manager Date From:		Co Manager Email:	
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Accepting New Athletes: Yes Accounts In House: Yes Fundraising Another Org: No Fundraising Org Name: Yes Alpine Skiing: No Fundraising Org Name: Yes Alpine Skiing: Cross Country Skiing: Yes Snowboarding: Snowshoe Racing: Yes Team Basketball: Basketball Skills: Yes Artistic Gymnastics: Rhythmic Gymnastics: Yes Aquatics: Athletics: Yes Soccer: Powerlifting: Yes Bocce: Colf: Yes Sottball: Tee Ball: Yes Tennis: Yes Yes Volleyball: Pag Yes Agreement: Yes Yes Unified Bocce: Unified Bowling: Yes	Medical Records Name:		Medical Records Date From:	
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Softball: Tee Ball: Tennis: Bowling: Volleyball: Flag Football: Agreement: Yes Unified Bocce: Unified Bowling:	Soccer:		Powerlifting:	
Tennis: Bowling: Yes Volleyball: Flag Football: Agreement: Yes Unified Bocce: Unified Bowling:	Bocce:		Golf:	Yes
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.)	N/A
3.	Local Program follows Special Olympics, Incorporated policies regarding athlete housing.	Yes
4.	Local Program understands the purpose of the SOWI Local Program Management Committee 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.	Yes
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.	0
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

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.	N/A
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
6.	Local Program has in-house accounts with Special Olympics Wisconsin	Yes
7.	Local Program raises funds in the name of another organization/entity (i.e. school, YMCA) to benefit Special Olympics Wisconsin	No

FUNDRAISING

1.	Local Program does not deny athletes participation based on economic circumstance. (Checking "No" indicates your Local Program denies athletes because of economic circumstance.)	Yes
	Facility Rental (i.e., bowling lane fees, gym rental, etc.)	
	Equipment (i.e., basketballs, bats, etc.)	
	Uniforms	
	Transportation	
	State Games Fees	
	Other:	
2.	The following question is only for Local Programs who conduct fundraisers in the name of Special	No

- Olympics Wisconsin: Local Program participates in state-sponsored fundraising events, many of which offer Local Program rebates.
- 3. Questions / Concerns

COMMUNICATION & PUBLIC RELATIONS

1.	Local Program official materials (i.e. stationary, event programs, newsletters) standards layout as outlined by Special Olympics, Incorporated. (Circling N/A 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	ESS	
	Facebook Group		
	Website		
	Mail		
	Other:	ESS	
3.	Local Program has read and understands the SOWI Crisis Communication Pla	n.	Yes
4.	Local Program's only form of social media is through a Facebook group (not F (Checking N/A means the Local Program does not use social media)	acebook page).	N/A
5.	Local Program flag or banner has the current Special Olympics logo. When ore standards must be met.	dering new materials,	Yes
6.	Local Program uniforms have the current Special Olympics logo. (Circling N/A contain the Special Olympics logo.) When ordering new materials, standards n		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®* ↓
Healthy Athletes®

↓
Get Into It®*

↓
Healthy Communities Mini-projects*

↓
Spread the Word to End the Word®*

↓
Unified Sports®*

 \checkmark

Young Athletes™*

^{1.} Local Program is aware of Unified Leadership, and, if appropriate, places athletes in a position of leadership at the Local Program level.

Yes

If you have athletes in these roles in 2022-2023, please list name and check all roles that apply: