ATHLETE REGISTRATION

Special Olympics Wisconsin

Dear Special Olympics Athletes, Parents, and Guardians:

Through the power of sports, our athletes find joy, confidence and fulfillment — on the playing field and in life. Whether you are new to Special Olympics or have been involved for years, we are excited you are part of the movement!

To register or re-register as a Special Olympics athlete, please complete the following forms:

- ☐ **ATHLETE REGISTRATION FORM.** The registration form asks for contact and other information.
- ☐ **ATHLETE RELEASE FORM AND ATHLETE LIKENESS RELEASE FOR SPONSORS.** Please read the forms, print the participant's name, sign, and date. The Athlete Likeness Release for Sponsors form is optional.
- ☐ **ATHLETE MEDICAL FORM.** The medical form is designed to identify health concerns that are more common among people with intellectual disabilities and clear an athlete to participate. Please fill out the Health History section on pages 1 and 2. If you do not understand any parts of the form, you may leave those parts blank to be discussed during the exam. The Physical Exam section on page 3 should be filled out and signed by a licensed medical professional.

All forms must be correctly completed **and** postmarked or emailed by the appropriate medical deadline date. Please refer to the link https://www.specialolympicswisconsin.org/sports-offered/ to determine the upcoming medical deadline date for your intended sport.

The Athlete Release Form and Athlete Medical Form instruct you to complete additional forms in certain situations. If this applies to you or if you have any other questions, please contact the Athlete Records Manager for Special Olympics Wisconsin, Inc., at (608) 442-5677 or by email at ssotelo@specialolympicswisconsin.org

Please submit the forms to medicals@specialolympicswisconsin.org or the address below:

Special Olympics Wisconsin
6582 Ronald Reagan Ave.
Madison, WI 53704