



Special Olympics
Georgia

**AGENCY
RESOURCE GUIDE**

*Special Olympics Oath:
Let me win. But if I cannot win, let me brave in the attempt.*

*The Spirit of Special Olympics:
Skill, Courage, Sharing, Joy*

www.specialolympicsga.org

**SOGA
RESOURCE GUIDE
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Special Olympics
Georgia

SECTION A INTRODUCTION

MISSION AND FACT SHEET

Special Olympics Georgia (SOGA) is a year-round program of sports training and athletic competition for children and adults with intellectual disabilities.

The MISSION of Special Olympics Georgia (SOGA) is to provide year-round sports training and athletic competition in a variety of Olympic-type sports for children and adults with intellectual disabilities, giving them continuing opportunities to develop physical fitness, demonstrate courage, experience joy, and participate in the sharing of gifts, skills and friendship with their families, other Special Olympics athletes and the community.

DID YOU KNOW...

The lifetime benefits of participation in Special Olympics was documented in a study conducted by the Yale University School of Medicine which demonstrated that individuals with intellectual disabilities who participate in Special Olympics programs achieve higher success, including living independently, maintaining employment and developing closer social relationships.

DID YOU KNOW...

Intellectual Disabilities are:

7 times more prevalent than blindness

7 times more prevalent than deafness

10 times more prevalent than physical disabilities

12 times more prevalent than Cerebral Palsy

35 times more prevalent than Muscular Dystrophy

DID YOU KNOW...

100 percent of the funds raised in Georgia remain in the state to benefit its citizens with intellectual disabilities. Special Olympics Georgia **does not receive funding from:** Special Olympics, Inc. The Joseph P. Kennedy, Jr. Foundation

SPECIAL OLYMPIC HISTORY & STRUCTURE

In 1970, 500 athletes gathered at a suburban Atlanta college to participate in the first-ever track and field event held under the Special Olympics Georgia banner. During its first 39 years, the organization has grown exponentially and has helped thousands of children and adults in the process. The number of active athletes has grown to more than 22,769, participating in 23 sports.

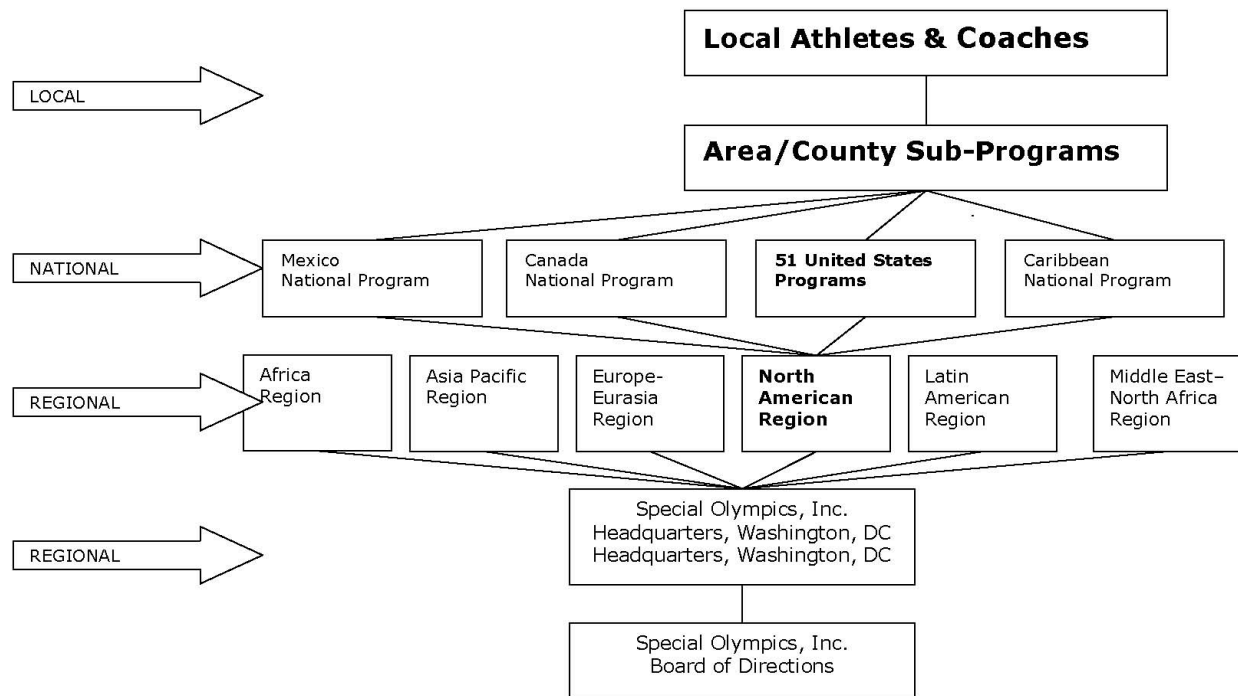
Special Olympics is the first – and still the only – organization to offer training and competition for these athletes. The continuing success of the organization depends on your support and the ongoing support of the community.

SPECIAL OLYMPICS STRUCTURE

Special Olympics, Inc. is the world governing body of Special Olympics. Based in Washington, DC, USA, the headquarters is staffed by over 100 individuals.

Special Olympics headquarters is responsible for accrediting programs, worldwide, to conduct Special Olympics activities and programs. Special Olympics headquarters oversees the management of all World and Multi-National Games and coaching education. It also provides support and collaboration in the development of materials, international conferences, and regional train-the-trainer seminars

SPECIAL OLYMPICS ORGANIZATIONAL STRUCTURE



Special Olympics Georgia State Games Deadlines

January	Substitution Deadline for Individual Sports (IWG) Problem Sheet Deadline (IWG) Drop Date Deadline for Teams (IWG)
January	Indoor Winter Games – Cobb County
January	Summer Games Wishlist due to SOGA
March	Deadline for Summer Games Paperwork Eligibility for Summer Games Masters Bowling Wishlist due to SOGA
May	Substitution Deadline for Individual Sports (SG) Problem Sheet Deadline (SG) Drop Date Deadline for Teams (SG)
May	Summer Games – Emory University, Atlanta
June	Deadline for Masters Bowling Paperwork Eligibility Date for Masters Bowling Fall Games Wishlist due to SOGA
July	Substitution Deadline for Bowling Singles (MB) Drop Date Deadline for Teams (MB) Problem Sheet Deadline (MB)
July	Masters Bowling – Savannah, GA
July	State Horse Show Wishlist due to SOGA State Sailing Wishlist due to SOGA
August	Deadline for Fall Games Paperwork Eligibility Date for Fall Games
September	Substitution Deadline for Individual Sports (FG) Problem Sheet Deadline (FG) Drop Date Deadline for Teams (FG)
September	Indoor Winter Games Wishlist due to SOGA
October	Deadline for State Horse Show Paperwork / Sailing Regatta Eligibility Date for State Horse Show / Sailing Regatta
October	State Fall Games – Albany, GA
October	Substitution Deadline for Horse Show / Sailing Regatta Problem Sheet Deadline for Horse Show
November	State Horse Show – Perry, GA
December	All Applications for Participation forms due to SOGA Deadline for Indoor Winter Games Paperwork Eligibility Deadline for Indoor Winter Games

FREQUENTLY ASKED QUESTIONS

1. What is the mission of SOGA?

To provide year-round sports training and athletic competition in a variety of Olympic-type sports for children and adults with intellectual disabilities, giving them continuing opportunities to develop physical fitness, demonstrate courage, experience joy, and participate in the sharing of gifts, skills and friendship with their families, other Special Olympics athletes and the community.

2. Who is eligible to participate with SOGA?

Individuals eight years of age and older who are identified by an agency or professional as having an intellectual disability are eligible to participate.

3. How often do Special Olympics Georgia events take place?

SOGA is a year-round program with athletes training and competing throughout the year. There are over 500 local events and competitions that athletes can participate in and 5 Statewide events. There are also numerous Regional, National and World competitions throughout the year.

4. How can I volunteer for Special Olympics Georgia?

Volunteers must first fill out a profile form to be entered into our database, then pass the protective behavior quiz online. This profile form can be obtained through the SOGA website, or by contacting the State Office. Volunteers can, serve as one-time event volunteers or coaches; work on local, area, and games management teams, as office staff and a variety other capacities in support of SOGA athletes. SOGA has over 15,000 volunteers statewide.

5. What sports does SOGA offer? Do I need to be an expert in the sport to volunteer for it?

SOGA offers year-round training and competition in 23 Olympic-type sports. These include: Alpine Skiing, Aquatics, Athletics, Badminton, Basketball, Bocce, Bowling, Cycling, Distance Walking, Equestrian, Floor Hockey, Golf, Artistic Gymnastics, Ice Skating, Running, Powerlifting, Rhythmic Gymnastics, Roller-skating, Sailing, Soccer, Softball, Table Tennis, Tennis and Volleyball.

Coaches need not be an expert in the sport, but they must go through coaches' clinics in order to get certified to coach a Special Olympics sport.

6. How is Special Olympics Georgia financed?

SOGA is supported by funds raised from individuals, organizations,

corporations, foundations, Board members, Honorary Board members and by revenue generated from special events, special projects and cause-related marketing programs. SOGA does not charge athletes to participate, and does not receive any funding from Special Olympics Incorporated, nor are we a United Way agency.

7. I have a child that is eligible for the program, how can my family get involved?

The Family Action Network (FAN) consists of local and area family representatives. FAN creates, promotes and supports Special Olympics families by establishing a statewide family network that will provide training, education and outreach (recruitment). FAN provides year-round activities for families of Special Olympics Georgia athletes. These activities give families the opportunity to share experiences and knowledge, and to form friendships with other Special Olympics families.

8. Aside from sports training and competition, what is the goal of Special Olympics?

To help bring individuals with intellectual disabilities into the larger society under conditions whereby they are accepted, respected and given the chance to become useful and productive citizens.

9. How many athletes participate with Special Olympics Georgia?

We currently have 22,769 registered athletes. As large of a number as that is, there are still thousands of eligible athletes who are not registered.

10. When I give to Special Olympics Georgia, what does my donation go towards?

Money raised through events and activities are used in Georgia to fund numerous activities like: year-round sports training programs, recruitment of new athletes, training volunteers, and for statewide competitions. For example, funds may pay for facility rental for a competition, for housing for athletes at competitions, for competition equipment, or for food for meals for athletes.

11. Is my donation tax deductible?

Special Olympics Georgia is a registered 501©3 non-profit organization. Donations to our program are tax deductible as allowed by law. In general, you may deduct any amount that is above the normal retail cost of the item you purchased. This should not be considered tax advice. Please consult with your tax advisor to be sure of the appropriate limits.

12. Can I get a receipt for my donation?

Special Olympics Georgia will send you a receipt for tax purposes before December 31st.

FACT TERMINOLOGY SHEET

Facts

15,000 Volunteers Statewide
5 Annual State Competitions
500 Annual Local & Area Competitions
22,769 registered athletes in Georgia
117 local agencies accredited
231 Local Coordinators
Annual Outreach Goal: 250
8,707 Certified Coaches
23 sports offered by SOGA
83 participating counties
\$3.7 million annual budget
22 full-time staff; 1 part-time staff
19 Unified sports
5,430 Unified Partners
Largest statewide fundraiser:
 Law Enforcement Torch Run (LETR)
 Jan-May
Statewide Partners (top level):
 The UPS Foundation
Official State Sponsors:
 The Coca Cola Co.
 Money Mailer
LETR Title Sponsor:
 Publix

TERMINOLOGY:

SOGA: Special Olympics Georgia
Special Olympics Athletes
Regional Manager
Local Coordinator
Area Accounts/Local or County
 Accounts
Area Management Team
County/ Local Management Team
Sports Council
Games Management Team
Coach
Assistant Coach
Unified Sports®
World Games
Special Olympics, Inc. (SOI)
Special Olympics North America (SONA)
Individuals with Intellectual
 Disabilities
Leadership Conference
Distinguished Service Awards (DSA)
Spring Family Camp
ALPS: Athlete Leadership
 Programs that include:
 • Athlete Input Council
 • Athlete Congress
 • Global Messengers
 • Athletes as Officials
 • Athletes as Assistant Coaches
 • Athletes as Management Team
 members



SECTION B

Eligibility

ATHLETE ELIGIBILITY FACT SHEET

To be eligible to participate in Special Olympics, athletes must be at least 8 years old and identified by an agency or professional as having one of the following conditions: intellectual disability; a cognitive delay as determined by standardized measures such as intelligence quotient or other generally accepted measures; or a closely related developmental disability, i.e., functional limitations in both general learning and adaptive skills. There is no cost to participate in Special Olympics. All prospective athletes must register to participate in Special Olympics.

AGE REQUIREMENTS

There is no maximum age limitation for participation in Special Olympics. The minimum age requirement for participation in Special Olympics competition is 8 years of age. For children with intellectual disabilities ages 2 and 7, they can strengthen physical development and self-esteem by building skills for future sports participation and socialization in Special Olympics Georgia, but are not allowed to compete at any level.

IDENTIFYING PERSON WITH INTELLECTUAL DISABILITIES

Special Olympics Georgia uses the definition of intellectual disabilities provided by the World Health Organization (WHO), the United Nations' specialized agency for health. According to the WHO, intellectual disability is a condition of arrested or incomplete development of the mind characterized by impairment of skills and overall intelligence in areas such as cognition, language, and motor and social abilities. Intellectual disability can occur with or without any other physical or mental disorders. Although reduced level of intellectual functioning is the characteristic feature of this disorder, the diagnosis is made only if it is associated with a diminished ability to adapt to the daily demands of the normal social environment. (Visit www.who.int for more information.)

A person is considered to have an intellectual disability for purposes of determining his or her eligibility to participate in Special Olympics if that person satisfies any one of the following requirements:

The person has been identified by an agency or professional as having an intellectual disability as determined by their localities; or The person has a cognitive delay, as determined by standardized measures such as intelligent quotient or "IQ" testing or other measures that are generally accepted within the professional community in that Accredited Program's nation as being a reliable measurement of the existence of a cognitive delay; or The person has a closely related developmental disability. A "closely related developmental disability" means having functional limitations in both general learning (such as IQ) and in adaptive skills (such as in recreation, work, independent living, self-direction, or self-care). However, persons whose functional limitations are

based solely on a physical, behavioral, or emotional disability, or a specific learning or sensory disability, are not eligible to participate as Special Olympics athletes, but may be eligible to volunteer for Special Olympics as partners in **Unified Sports®**, if they otherwise meet the separate eligibility requirements for participation in Unified Sports set forth in the Sports Rules.

DEGREE OF DISABILITY

Participation in Special Olympics training and competition is open to all persons with intellectual disabilities who meet the age requirements, regardless of the level or degree of that person's disability, and whether or not that person also has other mental or physical disabilities, so long as that person registers to participate in Special Olympics as required.

MULTIPLE HANDICAPS

Persons who have multiple handicaps may participate in Special Olympics provided they are eligible as noted above.

PROFOUND DISABILITIES

Individuals with profound disabilities can participate through Special Olympics **Motor Activities Training Program (MATP)**, developed by physical educators, physical therapists and recreation therapists. MATP emphasizes training and participation rather than competition.

ATHLETE PARTICIPATION FORM

You may download the athlete participation form by going to www.specialolympicsga.org and clicking on "SOGA in your community."

ATLANTOAXIAL INSTABILITY (AAI)

ATHLETE _____ AREA _____
AGENCY _____

SPECIAL RELEASE FOR ATHLETES WITH DOWN SYNDROME

This release and a copy of the x-ray report must be received by all athletes with Down Syndrome in order to participate in Special Olympics Georgia equestrian sports, gymnastics, diving, pentathlon, butterfly stroke, diving starts in swimming, high jump, alpine skiing, and soccer.

CERTIFICATION BY PHYSICIANS

The athlete named above has been x-rayed and the x-rays examined by me (simple examination does not detect Atlanto-Axial, so there must be an x-ray). _____ has been diagnosed as Atlanto-axial negative _____ has been diagnosed as Atlanto-axial positive. Complete section 2 with 2

physician's signatures and section 3 if checked and the athlete wishes to participate in the restricted activities.

Signature of Physician Date

=====

Section 2

I have examined the above named athlete, who has Down Syndrome and who has been diagnosed as having Atlanto-axial instability. I certify, based on my examination of the athletes and my review of their health information contained in this application, that despite the diagnosis of Atlanto-axial instability, this athlete is not medically precluded from participation in the restricted Special Olympics activities as listed above.

I further certify that I have explained to the athlete named in this application, (and to the parent or guardian whose signature appears below, if the athlete is a minor) the medical risks associated with Atlanto-axial instability and in particular, the risks associated with the athlete's participation in sports or events which, by their nature may result in hyper-extension, radical flexion or direct pressure on the neck or upper spine.

Restrictions (if any): _____

Physician's Name: _____

Address: _____

E-mail Address: _____

Restrictions (if any): _____

Physician's Name: _____

Address: _____

E-mail Address: _____

Section 3 – Must be completed by parents or adult athlete if Atlanto-axial positive

I am the parent or legal guardian of the athlete named above or the adult athlete named above. I certify that:

1. I have been informed by the physician named above that my son/daughter or myself has Atlanto-axial instability.
2. The risks associated with that condition, including the risks from participating in "equestrian sports, gymnastic, diving, pentathlon, butterfly stroke, diving starts in swimming, high jump, alpine skiing, and soccer" have been fully explained to me by the physicians named above, and I fully understand the possible medical consequences of my son/daughter or myself participating in any of these sports or events.
3. Although I recognize and understand the risks and possible medical consequences, I hereby give my permission for my son/daughter or myself to participate in Special Olympics, including any or all of the sports or events listed above, based on the certification of the physician named above that my son/daughter or myself is not medically preclude from participating in Special Olympics.

Signature of parent

Date

Signature of Adult Athlete

Date

PROTECTIVE BEHAVIORS

To achieve the mission of Special Olympics, those responsible for supervising Special Olympics athletes in both training and competition must take positive steps to protect athletes as well as other participants.

Screening of staff and volunteers is but one part of our responsibility to protect Special Olympics athletes. Screening is never 100% reliable; therefore, we need to institute additional measures designed to protect athletes while they are in our care.

Below are suggestions for strategies to protect athletes when participating in Special Olympics activities. These procedures are founded in common sense. You will also note that in most respects they reflect the same precautions that would need to be taken to protect any group of vulnerable individuals irrespective of whether they have developmental disabilities. All volunteers must take the protective behaviors test. Visit <http://www.specialolympics.org/protective-behaviors.aspx>

Preventing Physical Abuse

Corporal punishment including spanking, hitting, slapping, or other forms of physical disciplining will not be used by Special Olympics staff or volunteers.

Coaches and volunteers will not withhold water or food from athletes as a form of punishment. Water should be available for athletes during strenuous practice sessions and during competitions to avoid dehydration.

Only medications that have been prescribed by an athlete's physician will be dispensed to that athlete as indicated on his or her consent form signed by either a parent or legal custodian.

Preventing Emotional Abuse

At no time will coaches or other volunteers use profanity or otherwise curse at athletes for their performance or behavior during competition or practices.

Special Olympics staff and volunteers will treat all athletes with courtesy and respect. It is not in keeping with the purposes of Special Olympics to use denigrating or demeaning nicknames for athletes or to permit their use by others.

Special Olympics athletes will not be threatened or intimidated for any purpose including attempts at improving athletic performance or for controlling behavior. Discipline techniques will be constructive and positive.

Preventing Sexual Abuse

Whenever possible, in order to protect both athletes and volunteers, there should be at least two adult volunteers present to supervise activities such as changing into team uniforms, showering, and toileting. When it is necessary for a staff member or volunteer to speak privately to an athlete, they should find a place out of earshot, but within sight of others for their conference.

Physical contact is important for normal human development. Hugs can be especially important to reinforce the positive nature of athletic competition for those who come in first as well as last. Hugs between Special Olympics athletes and volunteers should be open (not secretive) and respect the limits set by the athlete. The staff and volunteers must respect any resistance by the athlete to physical contact.

Remember that hugging is an activity involving more than one person and respect for boundaries must be mutual for all parties. There may be times that volunteers or staff feel uncomfortable with physical contact with an athlete. Often, this discomfort has nothing to do with the athlete but more to do with the amount of physical contact and expressions of affection to which the individual is accustomed and comfortable.

Special Olympics staff members and volunteers should avoid touching areas normally covered by swimming

suits: breasts, buttocks, groins. Kissing on the lips and seductive massaging is not permitted (massaging pursuant to an injury or strain is permitted, but should be subject to observation by others).

Special Olympics staff and volunteers should be positive role models and help Special Olympics athletes develop appropriate boundaries for physical contact. There may be times that an athlete will attempt inappropriate physical contact with a volunteer, staff member or another athlete. In such cases, the volunteer or staff member should identify the objectionable behavior, explaining that it makes the volunteer feel uncomfortable and that a better way would be to shake hands, do "high five," or use some other more socially acceptable form of expression.

Staff and volunteers need to be very specific about both the behavior that is troublesome as well as alternate ways to express the emotions that an athlete feels.

When Special Olympics events require athletes to stay overnight, sleeping arrangements should take into consideration the gender and age levels of the athletes. Male and female athletes require separate accommodations. We suggest athletes should also be assigned sleeping rooms with athletes of similar age and intellectual functioning, as well as a coach.

In Partners Clubs and Unified Sports Programs, athletes normally are assigned to share sleeping quarters with their partners or counterparts. To compensate for the increased opportunities for inappropriate conduct, Special Olympics suggests that all athletes in these situations be educated about inappropriate physical contact and whom to inform if infractions occur.

In order to monitor Special Olympics athletes anytime they are in their quarters, hall monitors should be assigned on a rotating basis. They are responsible for keeping athletes in their own rooms, addressing needs of athletes that may arise and keeping unauthorized individuals out of athlete's sleeping quarters. Room checks should be on a random basis so that Special Olympics athletes will not recognize a pattern.

Consideration should be given to the assigning teams consisting of male and female staff or volunteers as hall monitors, with men responsible for checking the rooms of male athletes and women responsible for the female athletes. Each team should work for an hour or two before being relieved by the next team.

Special Olympics staff, with the assistance of volunteers, should know where the athletes are at all times during SOGA events or trainings.

Special Olympics personnel should clearly explain the rules of behavior to the athletes before each road trip. Language used should be simple but explicit.

Responding to Signs / Allegations of Abuse

LEGAL

1. Report any reasonable suspicion (one based upon observation or disclosure) of any form of abuse or neglect must be immediately to Special Olympics Program's CEO or representative.

SPECIAL OLYMPICS PROGRAM

1. You will be asked to complete a Special Olympics Incident Report as soon as possible. Special Olympics Program staff may contact the police and / or Child / Adult Protective Services.
2. Special Olympics Program may immediately suspend the alleged abuser's contact and involvement in all Special Olympics activities until the allegations are investigated.
3. In addition, Special Olympics staff may contact the appropriate protective services agency.
4. If the media contacts you, refer them to the Special Olympics Program CEO. Do not comment to the media or anyone else about the alleged incident. The Special Olympics representative will be the only spokesperson to the media.



GA
AB □
New □ or Update □

APPLICATION FOR PARTICIPATION IN SPECIAL OLYMPICS GEORGIA

Valid Application for Participation is mandatory for all training and competitions
4000 Dekalb Technology Parkway • Building 400, Suite 200 • Atlanta, Georgia 30340 • 770-414-9390

SECTION A: ATHLETE HEALTH INFORMATION (SHOULD BE SUBMITTED EVERY 3 YEARS)

Health Insurance Number (Athlete)

Used for Identification Only

Birthdate

Sex (M or F)

lete's Name (last name, space, first name)

lete's Mailing Address

lete's City

lete's State

lete's Zip Code

Parent's/Guardian's Daytime Telephone

Emergency Contact

Health Insurance Company

Policy Number

RENT OR GUARDIAN AUTHORIZATION AND MEDIA RELEASE

my own behalf or as the undersigned parent or legal guardian of the above named athlete, hereby request permission for the athlete to participate in the Special Olympics Program. I understand that if the athlete has Down Syndrome he/she cannot participate in sports or events which, by their nature result in hyper-extension, radical flexion or direct pressure on the neck or upper spine unless a full radiological examination establishes the absence of Atlanto-axial instability. I am aware that the sports and events for which the radiological examination is required are equestrian sports, artistic gymnastics, diving, pentathlon, high jump, alpine skiing, soccer, and butterfly stroke and diving starts in swimming. I, on my own behalf, hereby release, discharge and indemnify the athlete and myself, I acknowledge that the athlete will be using facilities at his/her own risk and I, on my own behalf, hereby release, discharge and indemnify the athlete. I am specially granting permission to Special Olympics Georgia to use the name, likeness, voice and words of the athlete in television, radio, newspapers, magazines and other media, and in any form not heretofore described, for the purpose of advertising or communicating the purpose and activities of Special Olympics and in appealing for funds to support such activities. I am not personally present at Special Olympics activities in which the athlete is to compete, so as to be consulted in case of necessity, you are authorized on my behalf and at my account to take such measures and arrange for such medical and hospital treatment as you may deem advisable for the health and well-being of the athlete. I authorize Special Olympics and/or its agents to make an independent investigation of my background, references, character, past employment, education, litigation history, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information aimed on my application.

HE UNDERSIGNEED ADULT ATHLETE, have read and fully understand the provisions of the above release and/or have had them explained. I hereby agree that I am bound thereby and shall defend Special Olympics Georgia and hold it harmless from and against all claims, damages, losses, expenses, costs and attorney's fees and disaffirmation thereof. I acknowledge and agree that the above information is true and correct.

I, THE UNDERSIGNED PARENT OR GUARDIAN of the above specified athlete, have read and fully understand the provisions of the above release and have explained them to said athlete. I hereby agree that I and said minor will be bound thereby, and I shall defend Special Olympics Georgia and hold it harmless from disaffirmation thereof by said minor. I acknowledge and agree that the above information is accurate.

Signature of Parent and/or Legal Guardian

Date

* A PHYSICAL EXAMINATION PERFORMED BY A LICENSED EXAMINER IS REQUIRED FOR INITIAL PARTICIPATION *

Athlete Name

Area Agency

MEDICAL CLEARANCE CHECK MEDICAL INFORMATION

- Does the athlete have:
- 1. Heart Problems Yes No
 - 2. Diabetes Yes No
 - 3. Seizures/Epilepsy Yes No
 - 4. Major Surgery/Serious Illness Yes No
 - 5. Painful/Shaking (under 40) died or heart disease Yes No
 - 6. Down Syndrome Yes No
- If athlete is Down Syndrome, have x-rays of the C1-C2 vertebrae been taken and examined? Yes No

- Date of x-ray
- Does the athlete have Atlanto-axial Instability? Yes No
7. Vision Problems/Blind Yes No
8. Hearing Loss/Deaf Yes No
9. Does athlete use wheelchair? Yes No
- Other

Current Medications Dosage

Allergies (Medication, Food, Insect Bites):

Date of Last Tetanus Shot:

* A PHYSICAL EXAMINATION BY A LICENSED EXAMINER IS REQUIRED EVERY 3 YEARS FOR ATHLETES WITH "YES" CHECKED ON 1,5*

SECTION B MEDICAL CERTIFICATION

I have examined the above named athlete and, in my opinion, there is no mental or physical reason why he or she should not participate in the Special Olympics sports training competition program. Further information will be forwarded if required. Current medication, if any, is specified with dosage on this application.

COMMENTS

Examination Date

Signature

Print Name

Address

City State Zip

Phone

ESS (Family member, coach, teacher, friend)

Date

Print Name

Date

**INSTRUCTIONS FOR COMPLETING THE
APPLICATION FOR PARTICIPATION**

SECTION A -ATHLETE HEALTH INFORMATION/PARENT GUARDIAN AUTHORIZATION AND MEDICAL RELEASE

All athlete information, emergency information, health and accident insurance information, health information, medications and allergies sections must be completed by a parent, guardian, or adult athlete. THE PERSON PROVIDING THE INFORMATION MUST SIGN AND DATE THE FORM IN THE SPACE PROVIDED. (IF SIGNED BY ATHLETE MUST HAVE WITNESS SIGNATURE). SECTION B - MEDICAL CERTIFICATION The bottom section of the form labeled “Medical Certification”

must be completed SIGNED and DATED by a licensed Physician, Physician Assistant or Chiropractor. A PHYSICAL EXAMINATION BY A LICENSED EXAMINER IS REQUIRED FOR INITIAL PARTICIPATION IN SPECIAL OLYMPICS.

All signatures, dates, addresses, phone numbers, birth date, health information and social security number MUST BE PROVIDED in order for the State office to accept and process the Application. The State office should get the ORIGINAL WHITE COPY and the Local Coordinator should keep the YELLOW COPY.

A vs. AB APPLICATION FOR PARTICIPATION The following guidelines will be used to determine “A” vs. “AB” applications:

1. An Application will be considered an “A” Application if questions 1-5 of Section A are answered NO. When this application is up for renewal (every 3 years) only Section A -Athlete Health Information will need to be completed. No examiner’s signature will be required under Section B - Medical Certification if application is completed before expiration date.
2. An application will be considered an “AB” Application if any questions 1-5 of Section A are answered YES. An examiner’s signature is required to have medical clearance of existing conditions. When this Application is up for renewal an examiner’s signature is required.
3. An athlete can have an “A” Application one time and the next time the Application could be an “AB” Application or vice versa. REMEMBER: If an application changes from A to AB or vice versa it will require a physical examination by a licensed examiner and the examiner’s signature under Section B - Medical Certification.

A parent/guardian or an adult athlete must sign Section A of the Application for Participation. If Section A of the Application is signed by an adult athlete then a family member, friend or coach must also sign Section A of the Application.



SECTION C VOLUNTEERS

VOLUNTEER OPPORTUNITIES AND TYPES OF VOLUNTEERS

Thousands of volunteers implement the Special Olympics program on the grassroots level. They serve on management teams, organize and conduct local, area and state Special Olympics activities and competitions, and assist in fundraising efforts.

Volunteers serve as certified coaches, games officials, and assistant coaches and in a wide variety of other capacities in support of Special Olympics athletes.

LOCAL AND AREA PROGRAM VOLUNTEERS

In Local and Area Programs volunteers are utilized in the following ways:

COACHES

Special Olympics athletes need proper training from devoted coaches and assistant coaches. Before starting, coaches go through a short training/certification session that explains what is expected and what to expect during training. After coaches are certified, they work with athletes on a regular basis.

Time commitment: 1-2 times per week for 8-10 weeks prior to the state competitions

Skills: You do not need to be an expert in the sport you coach. You only need a desire and commitment to work closely with the athletes.

MANAGEMENT TEAM MEMBERS

The state is divided into 18 areas, with several local programs making-up each area. Volunteers who are interested in providing leadership through service on a Local or Area Management Team are needed.

These Teams organize and efficiently run the local or area Special Olympics program. From public relations to fundraising, there is a place for everyone. **Time Commitment:** 1-3 days per month **Skills:** Desire to lead and be creative.

EVENT TEAM MEMBERS

Several fundraising events are held each year, like golf tournaments, coin drives, etc that need planners, recruiters and participants. Whether it's serving on a planning committee or organizing the day of the event, your help is needed.

Time commitment: One day or bi-weekly, two to three months leading up to the event of your choice

Skills: Creativity and good organization

STATE PROGRAM VOLUNTEERS

On the State level volunteers are utilized in the following ways:

GAMES MANAGEMENT TEAM MEMBERS

This is a team of individuals devoted to planning, organizing, implementing and evaluating each competition. Volunteers begin working about 4 months in advance and are used to organize and plan every aspect of the state competitions -from the Athlete Dance to each sporting venue.

EVENT TEAM/COMMITTEE MEMBERS

Several fundraising events are held each year, like Golf Tournaments, Road Races, Art Auction, the Duck Derby, etc. that need planners, recruiters and participants.

S.O.Y.L

Special Olympics Young Leaders (S.O.Y.L) is a group of professionals who want to make a difference. S.O.Y.L members are liaisons between SOGA, other young professionals and the corporate world. Members volunteer and network on behalf of SOGA while socializing and having Fun! Each year S.O.Y.L. also hosts Boccefest, a bocce ball tournament to benefit SOGA.

SPEAKERS

Volunteers who are willing and able to speak to our constituency on a wide variety of issues ranging from developmental disabilities to organizational skills are used whenever possible. Athlete Global Messengers or other volunteers make presentations year round.

STATE GAMES AND EVENT VOLUNTEERS

Summer, Winter and Fall Games, Horse Show and Masters Bowling are the five state competitions. Volunteers are needed for jobs at each of these -from cheering on athletes during competitions, to assisting with equipment set-up and breakdown.

VOLUNTEER INSURANCE INFORMATION

Accident Insurance for Special Olympics Georgia Volunteers:

Volunteers who are properly registered for each event* are covered by limited insurance in case of an accident. Please note, this coverage is secondary to any insurance you carry and is for ACCIDENTS only, not illness. Please immediately report to the medical staff at your venue in the case of an accident.

*Registration (signing in with picture ID) for each event is in addition to submitting the Volunteer Profile Form. To register for an individual event, you must notify and receive confirmation from the Special Olympics Georgia Volunteer Manager.

VOLUNTEER ELIGIBILITY AND POLICY ON SCREENINGS

Special Olympics Georgia has instituted a screening policy for volunteers to be proactive in the safety of the Special Olympics Georgia athletes.

VOLUNTEER SCREENING OVERVIEW

What Are the Different Types of Volunteers? Class A Volunteers

Volunteers who have regular, close physical contact with athletes; Volunteers in a position of authority or supervision with athletes; Volunteers in a position of trust with athletes; Volunteers who handle substantial amounts of cash or other assets of the Program

You are a Class A Volunteer if you volunteer in the following capacity:

- . • Coach
- . • Unified Partner
- . • Assistant
- . • ALP Mentor
- . • Overnight Host
- . • Treasurer
- . • Driver for athletes
- . • Games Management Team Member
- . • Local Management Team
- . • Area Management Team
- . • LETR Department Coordinator

Class B Volunteers

Volunteers who only have limited contact with athletes or who have contact with athletes accompanied by coaches and assistant coaches

You are a Class B Volunteer if you volunteer in the following capacity:

- . • Healthy Athletes volunteer
- . • Volunteers who drive on behalf of SOGA (other than drivers for athletes)
- . • Day-only volunteers
- . • Event specific volunteer without regular, close physical contact with athletes

What is the Overview of the Screening Policy for the Different Types of Volunteers? Class A Volunteers -Adults

In order to volunteer as a Class A Volunteer, applicants must:

1. Complete a Volunteer & Coach Profile Form with all necessary pieces of information for screening
2. Be screened using SOGA's national vendor of choice
3. Complete a photo ID check at time profile is received
4. Complete a photo ID check or identity verification at events

Class A Volunteers – Minors (under 18)

In order to volunteer as a Class A Volunteer, applicants must:

1. Complete a Volunteer & Coach Profile Form
2. Two personal/professional references, from someone not related to the minor or to the minor's legal guardian – one should be from the volunteer applicant's school, church, civic group, etc. on official letterhead and signed
3. Complete a photo ID check at time profile is received
4. Complete a photo ID check or identity verification by another staff member or Class A Volunteer (for minors, IDs are only required to the extent available)

5. Complete the Protective Behaviors Training

Class B Volunteers – Adults & Minors

In order to volunteer as a Class B Volunteer, applicants must:

1. Complete a Volunteer & Coach Profile Form or sign-in sheet
2. Photo ID check or identification verification by another staff member or Class A Volunteer at events (for minors, IDs are only required to the extent available)

What About Last Minute Substitutions?

If a Class A Volunteer is unable to attend an event and sends a substitute who has not been screened, the substitute is permitted to volunteer at that event only if a screened Class A Volunteer or Special Olympics Georgia staff member supervises that individual.

How Do I Complete a Photo ID Check at Time of Application?

If a Local Coordinator, Local Management Team member, Area Management Team member, State Games Management Team member or SOGA staff is present when you fill out the Volunteer & Coach Profile Form, ask him/her to indicate on the form that he/she has reviewed your photo ID. He/She must then sign the Volunteer & Coach Profile Form, indicating that you have represented your identity true to the best of the Local Coordinator or Staff Person's knowledge.

-OR You can send a copy of a photo ID that includes personal information (i.e. Driver's License) with your Volunteer & Coach Profile Form.

What Exactly Do You Screen?

SOGA will use a national vendor that includes the sex offender registry for each State in which the sex offender registry is available electronically, and will use a national vendor that conducts a statewide criminal background check.

Can I Send in a Screening Report from My Employer or Police Department?

To ensure we are obtaining consistent data, Special Olympics Georgia is required to conduct its own screening on existing and new Class A Volunteers as outlined in the volunteer screening policy. A criminal background check conducted by a volunteer's employer will not satisfy the screening requirement.

Do You Complete Motor Vehicle Checks?

Special Olympics Georgia will conduct a MVC if the applicant answers "yes" to the question regarding suspension or revocation of driver's license on the Volunteer & Coach Profile Form, or if Special Olympics Georgia has received information through the screening process that the applicant may have motor vehicle related convictions.

How Often Do I Have to be Screened?

Volunteers registered on or after January 1, 2005 must be re-screened at least every three years.

Why Do I have to be Screened, Especially Since I Have Been Volunteering with SOGA since the Beginning?

Special Olympics Incorporated has mandated that all Special Olympics programs implement a volunteer screening program consistent with the rules and regulations outlines in the Special Olympics Incorporated policy. Special Olympics Georgia shall not permit a Class A Volunteer applicant to participate as a Class A Volunteer after July 1, 2005, until that person has been screened and approved by Special Olympics Georgia.

What Happens If I Don't Want to Supply the Required Screening Information?

If an individual does not provide Special Olympics Georgia with the information that is required to conduct the screening, the individual shall not be permitted to volunteer on behalf of Special Olympics.

How Do I Know My Information Is Secure?

All Volunteer & Coach Profile Forms are locked in a secure filing cabinet located at the State Office of Special Olympics Georgia. The information is sent to a company within a spreadsheet via email across a secure and protected network.

Who Sees My Screening Information and How Do I Know If I Am Not Accepted As A Volunteer?

The CEO of Special Olympics Georgia is the sole person to receive the volunteer screening results. The CEO of Special Olympics Georgia will send a confidential letter of termination or non-acceptance to any individual whose screening results fall within the automatic disqualifiers listed in the volunteer screening policy, or to any individual who refuses to provide Special Olympics Georgia with the information that is required to conduct the screening.

BACKGROUND SCREENING

A. National Vendor

- Special Olympics Georgia uses a national vendor for volunteer screenings. To ensure we are obtaining consistent data, Special Olympics Georgia is required to conduct its own screening on existing and new Class A Volunteers as outlined in the volunteer screening policy. A criminal background check conducted by a volunteer's employer will not satisfy the screening requirement.

B. Sex Offender Registry

- Special Olympics Georgia will use a national vendor that includes the sex offender registry for each State in which the sex offender registry report is available electronically.

C. Criminal Background Checks

- Special Olympics Georgia will use a national vendor that conducts a statewide criminal background check.

D. Motor Vehicle Checks

- Special Olympics Georgia will conduct a MVC if the applicant answers "yes" to the question regarding suspension or revocation of driver's license on the Volunteer & Coach Profile Form, or if Special Olympics Georgia has received information through the screening process that the applicant may have motor vehicle related convictions.

DISCLOSURE AND AUTHORIZATION REQUIREMENTS

All Special Olympics Georgia volunteers are required to fill out the Volunteer & Coach Profile Form that meets the requirements as set forth below. The Special Olympics Georgia legal counsel has reviewed the forms to ensure compliance with State laws and regulations.

A. Volunteer & Coach Profile Form includes:

1. Full name (First, Middle, Last)
2. Date
3. Gender
4. Address – City, State, Zip, County
5. Phone – work, home, fax
6. Email – work, home
7. Business/School/Civic Club Affiliation
8. Employer & Occupation
9. Areas of experience that may be useful when volunteering
10. Volunteer interest areas
11. The following questions:
 - a) Are you currently certified by the National Governing Body in any sport?
 - b) Are you currently volunteering with SOGA? If yes, what program are you with?
 - c) If you would like to coach, what city or county are you interested in coaching in?
 - d) How did you hear about Special Olympics Georgia?
 - e) Do you use illegal drugs?
 - f) Have you ever been convicted of a criminal offense?
 - g) Have you ever been charged with neglect, abuse or assault?
 - h) Has your driver's license ever been suspended or revoked in any state or other jurisdiction?
12. Two non-family references
13. List the Date that the Protective Behaviors Training was complete
14. Emergency contact information

15. Legally sufficient authorization to conduct the necessary screening
16. A release that protects the Special Olympics movement from liability in connection with Special Olympics Georgia's conduct of the screening
17. Consent to use the volunteer's name and likeness to promote and publicize the purposes of Special Olympics

Automatic Disqualifiers with No Appeals Process

- . • child abuse
- . • sexual abuse of a minor/adult
- . • causing a child's death
- . • neglect of a child or any other individual for whom the potential volunteer had/has responsibility
- . • kidnapping
- . • murder
- . • manslaughter
- . • felony assault
- . • arson
- . • criminal sexual conduct
- . • theft of funds
- . • fraud
- . • larceny or other financial crime
- . • prostitution-related crime
- . • drug trafficking
- . • violent crime toward another

Automatic Disqualifiers for Driving on Behalf of Special Olympics Georgia

- . • DWI, DUI, or comparable offenses within seven years of application
- . • Three or more moving violations within the past three years of application

MISSING INFORMATION

Volunteer Refusing to Provide Information

1. If an individual does not provide Special Olympics Georgia with the information that is required to conduct the screening, the individual shall not be permitted to volunteer on behalf of Special Olympics Georgia.

VOLUNTEER & COACH PROFILE FORM



PLEASE FILL OUT FORM COMPLETELY. INCOMPLETE FORMS WILL NOT BE PROCESSED.
Please return to Volunteer & Event Manager via fax: 770.216.8339. Or mail to: 4000 Dekalb Technology Parkway Suite 400, Building 400, Atlanta, GA 30340 SOGA phone: 770.414.9390 ext. 120 Visit us on the web: www.specialolympicsga.org

FULL NAME Date: Gender: Male Female

_____ *First Middle* _____ *Last*

Address: _____ **Apt. #:** _____

City: _____ **State:** _____ **Zip:** _____ **County:** _____

Day Phone: _____ **Evening Phone:** _____ **Fax Number:** _____

Email address: _____ **Date of Birth:** _____

Business/School/Civic Club Affiliation:

Employer & Occupation:

Please list areas of experience that may be useful while volunteering: Please circle the volunteer areas that may interest you:

PHOTO ID CHECK – Please complete one of the following photo ID checks prior to sending your Profile Form to SOGA

Enclosed is a photo copy of my driver's license

I, _____ verify that the person on this Profile Form has represented his/her identify to the best of my knowledge:
(Full name of representing Volunteer)*

Signature of Class A Volunteer

Date

*** Only the following volunteers can complete a photo ID check**

Please circle your volunteer status:

- Local Coordinator
- Local Management Team
- Area Management Team
- State Games Management Team
- SOGA Staff

Games/Events and Administrative Coaching (Must be certified through SOGA)

One ay or Continuous Assignments:	10-12 week Commitment:			
Summer Games (June)	Data Input	Aquatics	Golf	Tennis
Winter Games (January)	Mailers	Alpine Skiing	Gymnastics	Athletics
Fall Games (October)	Word	Badminton	Ice Skating	Volleyball
Horse Show (November)	Processing/Filing	Basketball	Distance Running/Walking	
Masters Bowling (July)	Fundraising events	BMX	Power lifting	
State Sailing Competition	Golf events	Bocce	Roller Skating	
Local / County Games	5K races	Bowling	Sailing	
Games Management Team Member	Public Speakers	Cycling	Soccer	
Local Management / Planning Team	Entertainment	Equestrian	Softball	
Floor Hockey	Truck Drivers			
	Table Tennis			

Are you currently certified by the National Governing Body in any sport?

If Yes, what sport(s) are you certified in?

If you would like to coach, what city or county are you interested in coaching in? (List all that apply)

How did you hear about Special Olympics Georgia?

1) Do you use illegal drugs Yes ___ No ___ 2) Have you ever been convicted of a criminal offense? Yes ___ No ___ 3) Have you ever been criminally charged with neglect, abuse or assault?

Yes ___ No ___ 4) Has your driver's license ever been suspended or revoked in any state?

Yes ___ No ___ 5) Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse? Yes ___ No ___ If you answered "Yes" to any of the above questions, please explain below; giving date, charge, state, etc.

****If you answered yes to any of the above questions, it does not automatically mean you will be ineligible to volunteer.***

List 2 non-family references:

Name: Relationship: Address or Phone Number:

1)

2)

In the event of an emergency, contact:

Name	Relationship	Phone
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PLEASE READ BEFORE SIGNING: I understand that:

- By signing this form I authorize Special Olympics and/or its agents to make an independent investigation of my background, references, character, past employment, education, credit history, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application and/or obtaining other information which may be material to my qualifications for volunteerism now and, if applicable, during the tenure of my volunteer service with Special Olympics.

- By signing this form I release Special Olympics and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regards to the information obtained from any and all of the above referenced sources used.

- . • In the course of volunteering for Special Olympics, I may be dealing with confidential information and I agree to keep said information in the strictest confidence.
- . • The relationship between Special Olympics and volunteers is an "at will" arrangement, and that it may be terminated at any time without cause by either the volunteer or Special Olympics.
- . • I grant Special Olympics Georgia and Special Olympics, Inc. permission to use my likeness, voice, and words in or on television, radio, film, and on Special Olympics Georgia's and Special Olympics, Inc.'s Website, or in any other form, format or media to promote activities of Special Olympics.
- . • The following is my true and complete legal name and all information is true and correct to the best of my knowledge (this information may be used for screening purposes). Please Print All Information:

Full Legal Name:

Maiden Name or other names used:

Present Address:

City/State/Zip:

How long?

Former Address:

City/State/Zip:

How Long?

Date of Birth: _____

Social Security Number: _____

Driver's License Number: _____

State of License: _____

All information contained in this application is true and complete and correct to the best of my knowledge. I will contact the Special Olympics Georgia office at 770.414.9390 or 1.800.866.4400 if any of my information changes. In signing this application, I have read the forgoing information, and I agree to comply with the volunteer or coach code of conduct and all Special Olympics rules and regulations of the organization.

I HAVE READ AND UNDERSTAND THIS DISCLOSURE AND AUTHORIZATION TO OBTAIN INFORMATION.

Volunteer's Signature _____

Date: _____

Signature of Parent or Guardian if Volunteer is a Minor _____

Date: _____

Print Full Name of Parent or Guardian _____

HOW TO FIND VOLUNTEERS IN YOUR COMMUNITY

1. Determine which Volunteers will most aid your event. For example, do I need adult Volunteers or groups of kids? Each Volunteer / Volunteer group will bring something different to the table.
 - a. Adult Volunteers: Experience, comforting presence, logical thinking process
 - b. Groups of Kids: Excitement, love to athletes, educational opportunity
2. Determine the days / times you need Volunteers. Recruit Volunteer appropriately (i.e., you normally wouldn't ask a group of kids to volunteer on a weekday during the school session, etc.)
3. Research:
 - a. What organizations in your community have Volunteers? Would they considering partnering with you?
 - b. What groups are listed in the newspaper or on the internet? Would specific groups have the availability? For example, I noticed a "Housewife/Mothers Club" in the local newspaper; it was a great Volunteer group to target for my weekday needs! Research the "service organizations" in your community, via internet. Civitan Clubs, Kiwanis Clubs, Girl Scouts/Boy Scouts, etc. – there are many service oriented groups to target.
 - c. Consider church groups. They are usually extremely willing to serve. Contact the youth pastor or church secretary. You may decide to allow the group to make cards or write notes to distribute to the event participants.
4. Contact:
 - a. Gather the contact information of each group. You'll do better with a name/title than just calling to chat.
 - b. Introduce yourself, your event and explain your needs up front.
 - c. Many groups will want to visually have the information. Create a simple flyer and be prepared to fax or e-mail it to each contact.
 - d. Don't push too hard! Remember these groups are asked to give their time constantly. If the contact is not interested or if they are unavailable, simply thank the contact and move on.
 - e. Once you find Volunteers available and interested, record their information. Ensure you have a name, phone number and e-mail address. Mailing addresses are useful when mailing thank you cards after the event.
5. Pre-Event:
 - a. Remain in regular contact with the Volunteers.
 - b. Constantly share your gratitude and further details.
 - c. Make sure you are prepared to position Volunteers for the event; they'll look to you on the day-of.
6. Event:
 - a. Utilize all Volunteers. If they came to give their time, get creative! Find something for them to do.
 - b. Constantly share your gratitude. Knowing they are appreciated will bring Volunteers back next time!
7. Post-Event:
 - a. Update records to show which Volunteers came.
 - b. Send thank you cards to those that Volunteered.

VOLUNTEER OF THE MONTH NOMINATION FORM

Name of volunteer:

How many years has this volunteer been involved with Special Olympics Georgia?

How has this individual made an impact on the lives of Special Olympics Georgia's athletes?

Details please!

What obstacles/accomplishments has this individual been through/made on behalf of Special Olympics Georgia? Details, please!

Nomination Submitted By:

Position/Affiliation:

Phone/Email:

Please return to the Volunteer and Event Manager, by the first business day of the applicable month.

Special Olympics Georgia
4000 Dekalb Technology Parkway
Suite 400, Building 400
Atlanta, GA 30340
Fax: 770.216.8339
Attn: Volunteer Coordinator



SECTION D -1 STARTING A LOCAL PROGRAM

STEPS FOR A LOCAL MANAGEMENT TEAM

ACCREDITATION

MANUAL

Be A Fan!

Visit our Website www.specialolympicsga.org

4000 DEKALB TECHNOLOGY PARKWAY SUITE 400/BUILDING 400 ATLANTA, GA 30340
Telephone: 770-414-9390/FAX: 770-216-8339 Created by the Joseph P. Kennedy Jr.
Foundation for the Benefit of Citizens with Intellectual Disabilities

Maintaining our commitment to a grassroots philosophy, we must create and utilize effective volunteer management systems and organizational structures at the Area and Local levels.

This section outlines the steps necessary to apply for accreditation with Special Olympics Georgia. Suggestions for effective management techniques at the Area and Local levels are provided. Local Coordinators and Management Team Members should use these steps as an on-going reference during the accreditation process.

ACCREDITATION INFORMATION

All counties that have athletes must be accredited in order for the athletes to compete at any level. The Senior Coach Education and Program Manager will not sanction a competition until accreditation by that agency is complete.

Any agency coming to State Games must come from an accredited county in order to compete at the games.

An agency that is registering athletes in a county that is not accredited must become accredited before competing at any level.

POLICY AND PROCEDURES FOR ACCREDITATION

- I. Purpose: A letter of Accreditation shall be issued as authorization that the applying organization is approved to act as an official Special Olympics organization in the designated Area/Local Agency of Georgia.
- II. Commitments: Upon issuance of the letter of Accreditation to an agency, Special Olympics

Georgia, Inc. invests its belief, trust, and authority in such organization and Local Coordinator/Area and Local Management Teams for the proper, legal, and just implementation of that program. Upon acceptance of the letter of Accreditation and the mandate it represents, the organization and Local Coordinator/Local or Area Management Teams accepts full responsibility for implementation and recognizes Special Olympics Georgia, Inc. as the legal and binding authority on Special Olympics policies and practices.

- III. Issuance of Accreditation A letter confirming Accreditation shall be issued annually to the Area/Local Agencies of Georgia who meet the designated requirements.
1. Special Olympics Georgia, Inc. reserves the right to review the accredited organizations and Local Coordinator/Local Management Teams whenever the CEO deems necessary.
 2. Letter of Accreditation shall be issued to individuals and organizations who:
 - A. Complete the General Sequence for Accreditation.
 - B. Receive approval from Special Olympics Georgia, Inc. for the person who will serve as Local Coordinator.
 - C. Agree to hold Area/Local Management Team meetings at least quarterly
 - D. Send a copy of banking/corporate resolution and signature cards.
 - E. Send monthly financial reports to SOGA by the 15th of each month.
 - F. Officially identify the Area/Local programs as a part of Special Olympics Georgia, ex: Special Olympics Georgia, Area 15 or Special Olympics Georgia, Pickens County (no other titles are permitted).
 - G. Agree to identify Special Olympics Georgia, Inc. in all printed materials, releases, etc. as State Sponsor.
 - H. Agree that Local Coordinators cannot serve on the management team in a chair position.
 - I. Agree to promote and conduct a yearly range of goals for the program.
 - J. Agree to assist in achieving the goals of Special Olympics Georgia, Inc.
 - K. Agree to abide by the General Rules contained herein as well as the principles and spirit of Special Olympics.
 - L. Agree to furnish the State Office with all newsletters, minutes, games evaluations, and Management Team reports.
 - M. Agree to actively increase the number of new athletes participating in the program (outreach/quality growth).
 - N. Agree to complete and submit the Fundraising Authorization Form to SOGA prior to any/all fundraising events.

General Requirements for Accreditation: to ensure proper conduct of the program and fulfillment of all requirements by both Special Olympics Georgia, Inc. and Area/Local agency, the following information must be submitted to the State Office by December 15 every two years:

1. Submit a Management Team list.
2. If you are planning to raise money in the name of Special Olympics, open a certified financial account with SOGA Executive Director and Regional Manager included as signatories.
3. Submit an evaluation of previous year's goals.
4. Submit goals including outreach/quality growth for the upcoming year (Include the amount/percent to increase number of registered athletes in the outreach/quality growth goal).
5. Submit an 2-year Calendar of Events. (January 1 – December 31)
6. Submit a Competition Sanctioning Form for each scheduled competition.
7. Submit an annual budget that includes projected revenues and expenditures (Revenue plus beginning balance must be equal to/greater than expenses, refer to budget worksheet).
8. Keep a copy of a current signature card and corporate resolution on file.

Criteria for Evaluation of Accredited Program: Criteria listed below represent the essential elements in the establishment of a quality Special Olympics Program. Accreditation will be evaluated on the basis of the ability to provide the following:

1. Management Team Members should show representation of major related agencies.
2. Adequate communications system established throughout the program.
3. Number of participants involved is consistent with the size of the program.
4. General quality of the planned competitions.

5. Volunteer staff shows broad community involvement and is adequate to provide all necessary services at the competitions.
6. Encourage opportunity for social and educational experiences at competitions when possible.
7. Active participation of school systems, recreation departments, MRSC's, YMCA's, YWCA's and group homes throughout the program.
8. Exhibit quality growth in the numbers of participants and activities provided.
9. Provide efforts to improve the overall quality of the program.
10. Evidence of well planned year-round program.
11. Adequate financing for year-round program and competitions.
12. Plans for development and training of new volunteers.
13. Evidence of well developed public relations program.
14. Other items the CEO of Special Olympics Georgia, Inc. deems necessary.

H e l p M a k e T h e W h o l e Y e a r S p e c i a l

Complete and return by **December 15** to: **Special Olympics Georgia Program Services Manager
4000 Dekalb Technology Parkway, Suite 400,
Building 400 Atlanta, GA 30340**

***The State Office will send a letter noting completion of Accreditation upon receipt of all required accreditation materials.**

ACCREDITATION APPLICATION AND CHECKLIST

We, of Special Olympics Georgia, Inc. are applying for Accreditation for the current program year. We have enclosed all required documents necessary to secure our accreditation.

Date ___/___/___

Regional Manager/Local Coordinator_____

Local Coordinator's Email address_____

County / name_____

Agency /name_____

ACCREDITATION CHECKLIST

For Accreditation, every year:

- Submit Management Team List with at least seven of the positions filled.
- Submit signed job description for **new** Area Management Team members.
- **Local coordinators cannot serve on the Management Team.**
 - Open a certified financial account with CEO and Regional Manager as signatories if money is going to be raised in the name of Special Olympics.
 - Submit evaluation of previous year's goals.
 - Submit Goals and Objectives for the upcoming year, **including a quality growth goal with projected increase in number of participating athletes.**
 - Submit Annual Calendar of Events (January 1-December 31) including:
 - Dates and locations of meetings.
 - Dates and locations of competitions.
 - Due date for competition information to be turned in to Local Coordinator and Regional Manager.
 - Dates of Fundraising
 - Submit a Competition Sanctioning form for each scheduled competition.

- Submit a copy of current signature card, and Corporate Resolution, including CEO, Regional Manager and current Management Team positions and signatures. (*ie: Special Olympics Georgia-Area # or county name*)
- ⑩ Submit Fundraising Authorization Form for each Fundraising event ⑩

Example

Submit an annual budget including projected revenues and expenditures

<i>Example</i>	<p>REVENUE PROJECT:</p> <ol style="list-style-type: none"> 1. Fundraiser 2. Solicitation 3. Grants 4. Corporate contributions 	<p>EXPENDITURES:</p> <ol style="list-style-type: none"> 1. Athlete participation fees 2. Ribbons 3. Competition registration fees 4. Postage
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Note: Revenues plus beginning balance must be greater than or equal to expenses. A sample budget is included in the back of this manual.

MANAGEMENT TEAM INFORMATION

Local Coordinators and the Management Teams play an important and critical role in Special Olympics. These individuals reach out to involve a variety of people from local communities in Special Olympics, including: people with intellectual disabilities, families, teachers, civic leaders and groups, sports associations, high school/college students, and others. Local Coordinators and the Management Teams are the leaders who ensure the availability of quality sports training and competition opportunities to all eligible participants. The training, in turn, helps Special Olympics athletes continue to develop and improve their skills and self-concept.

Serving as Local Coordinator or as a member of the Management Team requires time, leadership abilities, and a lot of energy. Competent, hard-working leaders, who can juggle multiple tasks, are the foundation of good Special Olympics Programs. We cannot place enough emphasis on the fact that sound training for your leaders will result in higher quality Special Olympics Programs. Training our coaches and athletes is the basis of everything we do in Special Olympics, and we have seen the positive outcome of these efforts.

Our goal is for programs to expand to include quality growth to potential athletes who are not currently enrolled and to provide extraordinary opportunities to all Special Olympics athletes and their families to gain a sense of pride.

WORKING WITH THE MANAGEMENT TEAM

The Management Team is composed of key volunteers (chairpersons) who the Local Coordinators will work with closely to achieve a successful Program. The Management Team serves as a valuable and necessary link between the Special Olympics Program and the human and material resources of the community. Management Team Members are recruited with the following two purposes in mind: to plan and evaluate activities and to serve as a chairperson of a particular aspect of the program (*ie. Training, Fundraising, etc.*). The ultimate goal is for each chairperson to establish a working team to assist with the functions of their committee.

Two key positions are the Local Coordinator and Chairperson. The Local Coordinator works with and monitors the chairs of important committees who direct the functional activities of the Program. The ability of the Local Coordinator to effectively motivate and utilize the talents of the Management Team Members will distinguish between a struggling and a flourishing Program. The role of the Local Coordinator is to coordinate the efforts of the other Management Team Members, monitor progress, ensure that everyone is informed of plans and needs, and to involve and recognize all Management Team Members for their efforts.

The Management Team should be comprised of a minimum of ten (10) people who are committed to Special Olympics. Members should be selected on the basis of their willingness to allocate

volunteer time and their ability to undertake responsibilities effectively. SOGA reserves the right to remove volunteers if necessary. In order to be accredited by SOGA, 70% of these positions must be filled by the time accreditation is submitted. An accredited Management Team should usually have a Chairperson, Secretary, and at least eight committee chairs: Training, Competitions, Public Relations, Fundraising, Finance, Athlete, Volunteers, and Families.

Membership on the Management Team could include representatives from the following types of groups:

1. local ARC
2. Special Education
3. city or county Parks and Recreation Department
4. civic and fraternal clubs
5. college and high school student groups
6. medical community
7. parents/siblings of people with intellectual disabilities
8. financial institutions
9. educators
10. athletic or coaching associations
11. marketing or PR firm
12. accounting firms
13. Local Special Olympics volunteers
14. city or county government
15. law enforcement or military

Recruit individuals who will serve an identified useful purpose in carrying out your Program activities. A well developed Management Team should become self-perpetuating, adding or replacing members as needed. In general, terms of membership should be no more than three years, with allowance for re-appointment for outstanding service.

The Management Team should meet at least four times each year. One of these meetings should be during the summer to plan the upcoming year's activities. Additional meetings of the Management Team should be called as necessary and at least quarterly.

The difference between a successful Management Team and a non-productive one will depend upon the skill of the Chairperson in effectively involving Management Team Members. The Regional Manager/Local Coordinator and the Chairperson act as the team leaders for the Management Team and are responsible for motivating them and enabling them to carry out Area/Local activities.

The following suggestions will help with an effective operation of the Management Team:

- Make sure that the Area/Local Management team has a real purpose, goals, and a plan agreed on by you and the Team.
- Make sure that members fully understand what tasks are expected of them and make sure that you have selected only those people who are motivated and capable of completing their particular jobs.
- Hold efficient meetings. Distribute agendas and materials in advance. Start and end meetings on time. Allocate discussion time according to the relative importance of items to be addressed. Do not allow meetings to get side-tracked.
- Facilitate the involvement of all Management Team Members. Discourage people from monopolizing discussion time. Double-check for agreement on important issues and summarize decisions and responsibilities discussed before the meeting is adjourned.
- Provide credit and recognition for the accomplishments of the committee. Replace committee members who do not fulfill their commitments.

RECRUITING A SPECIAL OLYMPICS MANAGEMENT TEAM

- Draft a letter introducing Special Olympics and invite key people to an organizational meeting (a sample letter is located in the back of the manual).
- Follow up with a postcard and/or friendly phone call, encouraging them to attend the meeting.

- Develop an agenda for the meeting. Keep the meeting concise and follow the agenda strictly. Potential members will be impressed by efficient use of meeting time, and it will convey that you understand the value of their time. The meeting should not be longer than 60-90 minutes. If you are interrupted for lengthy periods of time or you happen to become involved with topics other than those listed on the agenda, tactfully announce that you are slightly off topic and you will return to the discussion after the agenda has been completed. A sample agenda may include the following:
 - A. Distribute the checklist agenda.
 - B. General introductions and description of purpose of meeting
 - C. Show a short Special Olympics video or slide show .(AV equipment should be set up and ready to operate prior to the meeting.)
 - D. Discuss existing and potential participants in the Special Olympics Programs.
 - E. Have a Global Messenger speak about their positive experiences with Special Olympics and the importance of the Program for the community.
 - F. Describe needs for the Special Olympics Area/Local Program:
 - Chairperson
 - Athlete
 - Finance
 - Volunteers
 - Training
 - Competition
 - Public Relations
 - Fundraising
 - Secretary
 - Families
 - G. Describe the manner in which the representatives in the community can assist with the needs listed above.
 - H. Describe the general concept of a Special Olympics Management Team.
 - I. Ask each person who commits to serve as a Management Team Member to complete a Volunteer Profile Form.
- 1. **Chairperson:** responsible for the organization and administration of the Management Team and for leading meetings.
- 2. **Secretary:** records attendance, minutes, and sends out minutes and notices for upcoming events/meetings.
- 3. **Training:** organizes and conducts clinics for coaches, officials, Games Management Team, and Competition Directors; ensures use of the Special Olympics Sports Skills Program Guides and updated Rule Books; ensures each Local Program has a minimum eight week training component; encourages participation in a variety of sports.
- 4. **Competition:** oversees all sports competitions and recommends a Competition Director to the Regional Manager/Local Coordinator for each competition.
- 5. **Athlete:** provides insight on how to meet specific needs of athletes. They should be a contributing part of the team.
- 6. **Fundraising:** develops plans for raising necessary funds to support Programs; must file necessary fundraising forms with State Office; works with Finance Chairperson and Regional Manager/Local Coordinator to develop budget.
- 7. **Finance:** manages accounting of all earnings and expenditures for the Program; must prepare monthly financial statements and submit to State Office; works with Fundraising Chairperson and Regional Manager/Local Coordinator to develop budget.
- 8. **Volunteers:** locates and recommends Program Coordinators and committee members to the Regional Manager/Local Coordinator; maintains a master file of all volunteers to be used in conjunction with all games, competitions, and fundraisers.
- 9. **Public Relations:** arranges for media coverage, press conferences, communications, etc. for the local/area; informs the public about all of the things that a person with intellectual disabilities can accomplish and emphasizes the impact that sports training can have in their lives; works with the Competition Committee to promote Area/Local Competitions; works with Regional Manager to recruit more athletes and families.
- 10. **Families:** develops specific plans to encourage parents and family members to actually participate in Special Olympics by coaching their own Special Olympics athletes, joining the Family Action

Network, helping conduct competitions, recruiting other parents, advocating Special Olympics in schools and recreational programs, assisting with transportation arrangements and advising all other committees on using more parents and family members as resources.

Optional:

11. **Medical:** secures and coordinates physicians/chiropractors/physician assistants who would be willing to provide free health screenings to Special Olympics athletes; assists Medical Committee at competitions.

**SPECIAL OLYMPICS GEORGIA, INC.
LOCAL COORDINATOR VOLUNTEER AGREEMENT**

Local Coordinators are volunteer affiliates from schools, associations, institutions and other registered agencies. Local Coordinators are responsible for the following:

- Annual Agency Application for Participation, all games wish lists, Athlete Application for Participation forms and fees (for all eligible athletes in the area), and agency accreditation
- Establishing and developing year-round training programs at the local level
- Securing game entry requirements (times, scores, distance, and team assessments) and submitting them to appropriate games personnel
- Submitting the Fund Raising Project Authorization Form for all local fundraising projects
- Publicize objectives and accomplishments of the local program to encourage public cooperation and assistance
- Attending all local and area organizational meetings (State competition wishlist meetings are mandatory in order for athletes to compete)
- Having Athlete Participation Forms at all local, area, and state competitions
- Gathering and submitting volunteer and coach profile forms
- Providing a year round training program for Special Olympics athletes in the community
- Recruiting volunteers to help with training sessions and games
- Encouraging parents to work with their athletes

I am aware that the position of Local Coordinator is a volunteer position. However, in some circumstances if the Local Management Team agrees to pay a stipend for services rendered:

- Payment received for the performance of the above duties can not exceed \$1,500.00 annually;
- Payment from which no deductions will be withheld, including Federal and State tax, F.I.C.A. tax, retirement, and employee insurance;
- Accumulated amounts of \$600.00 or more for a year beginning January 1 through December 31 will be reported on a 1099 form (Miscellaneous Income) to be included on your income tax returns;
- Special Olympics Georgia, Inc. will file the 1099 with both the Internal Revenue Service and State of Georgia Income Tax Division.

I do hereby agree to run the Special Olympics Program in my area or for my agency and to abide by the terms of the agreement listed above. I will perform the duties listed above to the best of my ability:

Special Olympics Georgia, Incorporated employs the Affirmative Action plan which gives equal employment/volunteer opportunities to all applicants regarding race, color, religion, sex, or national origin.

Area/Agency _____ Date _____

Signature of Local Coordinator

Signature of SOGA Representative

E-Mail

Address City State Zip _____ - _____ - _____ - _____ - _____
_____ - _____ - _____ Phone (business) Phone (home) Fax

SPECIAL OLYMPICS GEORIGIA MANAGEMENT TEAM FINANCE CHAIRPERSON JOB DESCRIPTION

JOB TITLE: Finance Chairperson

OBJECTIVE: The Finance Chairperson Identifies the Program's financial needs and manages funds raised by the local Special Olympics program throughout the year.

MANDATORY RESPONSIBILITIES:

- Adhere to SOGA specific and SOI policies regarding finance and fundraising. (See Financial Management Guide)
- Attend and fully participate in Management Team Meetings.
- Communicate regularly with other Management Team Members.
- Ensure that an annual budget is developed based upon the Program's needs.
- Forward the budget to the Management Team for approval and submit to SOGA as part of Accreditation.
- Send required financial reports & bank statements to the SOGA state office monthly.
- Keep accurate records of all income and expenditures.
- Analyze outcome of fundraising projects.
- Establish checking (and savings) account under direction of SOGA Office.
- Adhere to SOGA specific and SOI policies regarding protective behaviors.
- Coordinate with the Regional Manager/Local Coordinator a planned budget of expenditures and revenue
- Present a financial statement at each called or regular meeting of the Management Team for approval.
- Submit Volunteer and Coach Profile Form for screening.

TIME COMMITMENT AND TIME FRAME:

- This is a year long commitment.
- Management Team meetings are held at least once every quarter (at least four times per year). Meetings may be held more often if needed. Attendance is mandatory.
- Performance of the Finance Chairperson will be evaluated annually.

HELPFUL SKILLS:

- Experienced in finance and/or accounting.
- Well developed organizational and communication skills.

For additional support and resources or if you have questions, call the Program Services Manager at the State Office. 1-800-866-4400, ext 114.

Signature

Date



Special Olympics
Georgia

SAMPLE LETTER OF INVITATION

DATE

ADDRESSEE'S NAME

ADDRESS

Dear _____:

On behalf of Special Olympics (area or agency name), I would like to take the opportunity to invite you to attend a short informational meeting concerning the growth of our Special Olympics Program in (Area or Agency). My name is _____ and I am the Regional Manager/Local Coordinator /Chairperson for Special Olympics (geographic location). I will be conducting the meeting.

Special Olympics Georgia, Inc. is a year-round program of physical fitness, sports training, and athletic competition in a variety of Olympic-type sports for children and adults with intellectual disabilities. The Program is unique in that it accommodates competitors at all ability levels by assigning them to "competition divisions" based on both age and actual performance ability. As the Regional Manager/Local Coordinator/Chairperson, it is my job to offer the Special Olympics opportunity to all eligible people in this area. Currently, we are serving (# of athletes) and have the potential to serve (# of athletes). Your support is needed and valued!

On (date and time), at (location), there will be a meeting of people from various businesses and civic organizations in the area who are interested in learning how they or their organization can help to build a strong year-round sports program in our community. Without our help, many individuals with intellectual disabilities in our community will continue to stand on the sidelines of our playing fields. Please join us in fulfilling our mission. You are guaranteed an incredibly rewarding experience.

Inspired by their greatness,

(name)

(title)

RSVP (phone) By (date)

A Dictionary of Special Olympics Terms

Terms have different meanings in each Special Olympics program, which refer to people, places and things. In order to better understand what you hear when talking to people in Georgia about Special Olympics, please refer to the following terms.

North American Office: Our headquarters, with which each state and country is affiliated, is Special Olympics Incorporated (SOI), located in Washington D.C. and North Carolina.

Region: Within the United States, SOI has 8 regions. Georgia is part of the Southeast Region, which also includes North Carolina, Tennessee, South Carolina, Florida, Mississippi, and Alabama. Each region has a regional representative from the SOI Office.

State: Each state in the United States has a Special Olympics organization. Special Olympics programs in other countries are called International Programs.

Area: In Georgia, the state is divided into eighteen Areas. An Area consists of four or more counties. A map of the designated Areas around the state follows this section of the manual.

County: In Georgia, each county program consists of the Local Special Olympics programs within that county.

Local Program/Agency: A Local program/agency is a school or school system, community program, group home, institution, or group of independent athletes who have a current Application for Participation form on file with the SOGA Office and have paid their annual registration fees.

Local Coordinator: The Local Coordinator is the contact person in each Local program that oversees the Local Management Team for accredited agencies.

Regional Manager: A Regional Manager is a member of the Special Olympics Georgia staff who serves as the program liaison for the designated regions/Areas of the state.

Coach: A coach is an individual who works directly with a Special Olympics athlete in a hands on trainer/mentor role. A certified coach is one who has successfully completed an approved 4-6 hour Special Olympics Coaches Clinic and a 10-20 hour practicum.

Athlete as Assistant Coach: An athlete that attends a coaches training in order to become certified as an Assistant Coach.

Assistant Coach: This term generally refers to someone who accompanies an athlete or a group of athletes to a Special Olympics event. In many cases, this person is also a coach.

Games Management Team: This team is made up of the Games Director and administrative directors who coordinate several committees to plan, organize, conduct, and evaluate competitive State, Area, & Local level competitions.

Certified Coaches Clinic: A certified Coach's Clinic is an approved 4-6 hour course with 10-20 hours hands on practicum that offers national certification to coaches, event directors, and officials. Staff Development Units (SDU's) or Continuing Education Units (CEU's) may be offered as an incentive for coaches completing the certification process.

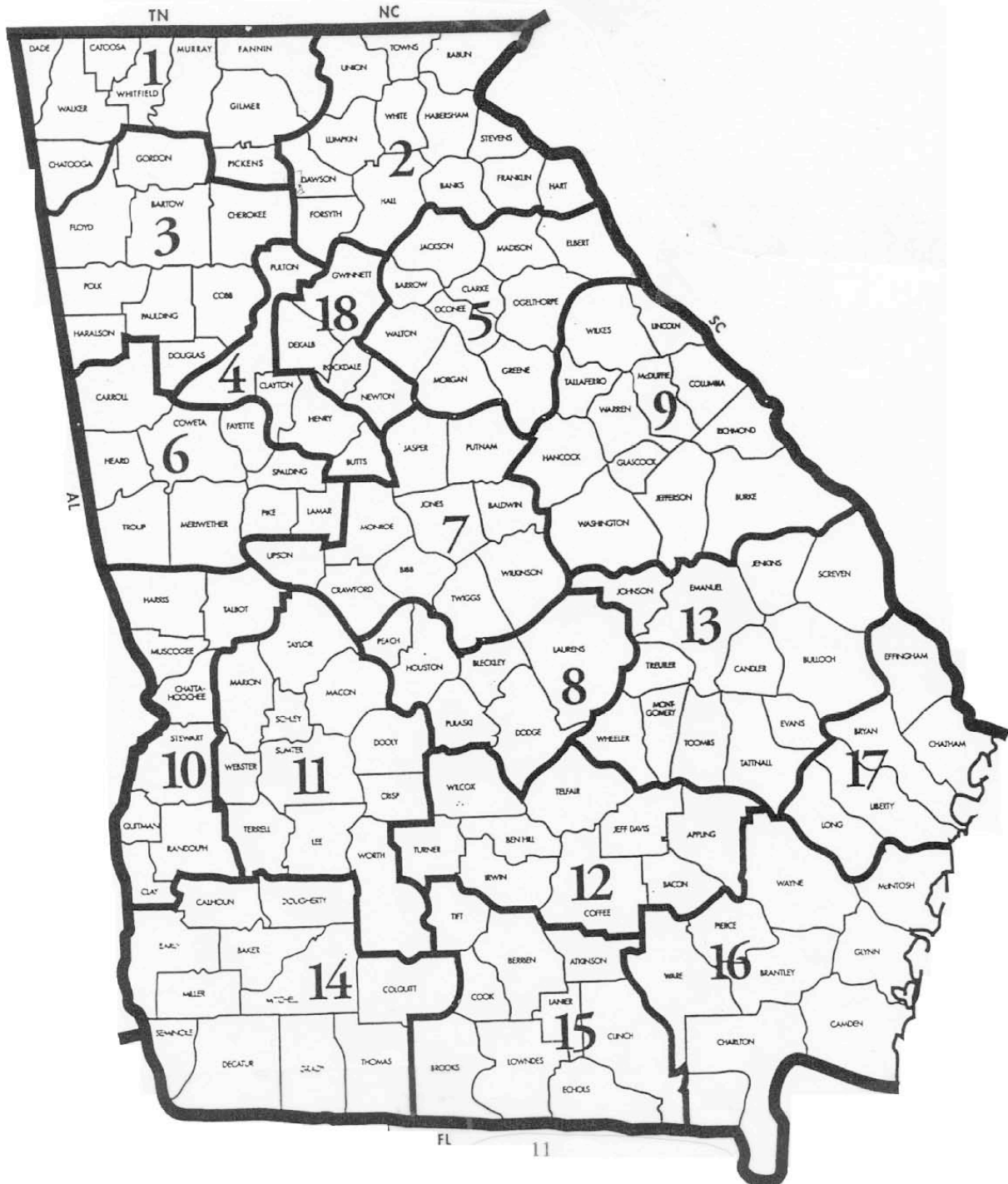
Wish List: The submission by a Local Coordinator of the number of athletes an agency wishes to bring to a particular State Games and in which sports. These are turned in on Wish List forms and must be submitted by the Wish List deadlines.

Area Map

The state is divided into 18 Areas for organizational purposes. Each Area has a Regional Manager who is responsible for providing support and guidance to the Area/Local programs.

AREA MAP

The state is divided into 18 Areas for organizational purposes. Each Area has a Regional Manager who is responsible for providing support and guidance to the Area/Local programs.



LOCAL/AREA COMPETITION CRISIS PLAN

A "**crisis**" is defined as any emergency situation, such as a life-threatening incident involving an athlete, volunteer or spectator. In the event of a crisis, the **crisis team** will report to the designated crisis room/area. (Prior to the event, all crisis team members should be notified of the location of the crisis room/area).

CRISIS TEAM:

Competition Director

Local Coordinator

Area/Local Management Team Chairperson (if present)

Medical Staff Representative

Law Enforcement/Security Representative (if present)

Public Relations Chairperson

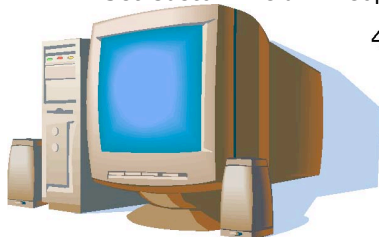
SOGA State Staff Person (if present)

If a crisis should occur at a competition venue, the Medical staff and the person running that particular event (Competition Director) should be located and directed to the scene. The Competition Director or Medical staff should immediately notify Competition Headquarters of the crisis. After directing any necessary emergency action and securing all facts, the Competition Director should then report to the crisis room with all available information. If the Competition Director is not able to leave the scene, he/she should move to an **isolated** area away from the public and stay in touch with the Crisis Room/Team via radio. The Crisis Room radio traffic for the crisis should be monitored "**silently**" (**on a separate channel**) until all information has been received and the Crisis Team is ready to react. If a crisis should occur at a non-competition location such as a dining area, on-site medical personnel should notify the Competition Headquarters or Competition Director of the crisis and then report to the crisis room after emergency actions are completed or stay in immediate radio contact. The SOGA office should be notified verbally as soon as possible of the situation and a written incident report should be submitted immediately.

Only SOGA staff members should make direct comments to the media.

AGENDA FOR GMS TRAININGS

1. Introduction to Games Management System(GMS) and Benefits
2. Install the Program on the Computer
3. Set Permanent Delegation
4. Set Custom Field in People



4. Set Custom Field in People
5. Enter People
6. Set Parameters for Games
7. Enter Games Paperwork
8. Division and Print Heat Sheets
9. Uninstall Program

UPDATING GMS

1. Go to My Computer: apps on SOGA1:R drive.
2. Navigate to GMS 5010004 and click on it.
3. Choose "I Agree" under winzip.
4. Highlight the 1st file, press the 'Shift' key and hold it down. Scroll to the bottom while holding the 'Shift' key and highlight the last file.
5. Choose the 'Extract' button.
6. Under folders/drives, click on the 'Plus' button next to 'local disk:C drive.
7. Highlight the GMS folder, do not hit the plus sign beside it.
8. Hit the 'Extract' button. *If a message box pops up and asks if you want to replace the files, choose YES.
9. Once the files are done extracting, open GMS on your desktop.
10. Under the help file, choose 'About' and make sure your version is



5.1.0.4.

OBTAINING YOUR CURRENT ROSTER FROM THE STATE OFFICE

In order to organize and division your games, you must first have all of your athletes entered into GMS. At the State Office, each athlete is entered into our database according to the applications for participation we receive, and are placed in their respective agencies.

To cut down on the time you spend entering athletes, you can IMPORT your roster onto your GMS from the State Office. All you have to do is contact:

As always, you can call for assistance with GMS at anytime: 770-414-9390

Special Olympics Georgia Athletic Participation Summary

Directions for completing the Athlete Participation Summary (Sports Report)

Can be completed using the Computer or printed and filled out by hand.

Save the attached "Athlete Participation Summary" (Sports Report) to your computer.

Open the document that you have saved to your computer.

A dialog box will pop up. Hit "OK".

After completing the Program Information at the top of the page, you are ready to begin.

Do not complete lines 8, 11, 23, 29, 33, 36, 37, 40-43 (Special Olympics Georgia does not offer these sports). *Please note: Line 38 refers to Speed Skating for Ice Skating. Speed Skating for Rollerskating is to be included in Line 25.*

Please note that if you fill this form out using the computer, the totals will be calculated for you. If you are filling this form out by hand, there is no need to calculate totals.

Special Olympics Georgia will take all agency forms and enter the numbers into an identical form to be sent to Special Olympics North America.

Save your completed document and send it to your Regional Manager.

Hints for Completion

Section 1 – Athletes: Trained and Competed in Olympic Type Competition

This section refers to athletes that have trained and competed on the local, area, state, regional, national, or world level during the year in any of the listed sports.

Section 2 – Participants That Have Trained but Not Competed

This section refers to athletes that have trained but have not competed in any competition, on any level, during the year, in any of the listed sports.

Section 3 – Participation Summary – Unified Participation by Sport

Unified Athletes – refers to Special Olympics Athletes that participate in a Unified Sport(s) during the year.

Unified Partners – refers to Unified Partners that participate in a Unified Sport(s) during the year.

GA COUNTY LIST BY AREA

County	Area	County	Area
Appling County	12	Evans County	13
Atkinson County	15	Fannin County	1
Bacon County	12	Fayette County	6
Baker County	14	Floyd County	3
Baldwin County	7	Forsyth County	2
Banks County	2	Franklin County	2
Barrow County	5	Fulton County	4
Bartow County	3	Gilmer County	1
Ben Hill County	12	Glascock County	9
Berrien County	15	Glynn County	16
Bibb County	7	Gordon County	3
Bleckley County	8	Grady County	14
Brantley County	16	Greene County	5
Brooks County	15	Gwinnett County	18
Bryan County	17	Habersham County	2
Bulloch County	13	Hall County	2
Burke County	9	Hancock County	9
Butts County	4	Haralson County	3
Calhoun County	14	Harris County	10
Camden County	16	Hart County	2
Candler County	13	Heard County	6
Carroll County	6	Henry County	4
Catoosa County	1	Houston County	8
Charlton County	16	Irwin County	12
Chatham County	17	Jackson County	5
Chattahoochee County	10	Jasper County	7
Chattooga County	1	Jefferson County	9
Cherokee County	3	Jeff Davis County	12
Clarke County	5	Jenkins County	13
Clay County	10	Johnson County	13
Clayton County	4	Jones County	7
Clinch County	15	Lamar County	6
Cobb County	3	Lanier County	15
Coffee County	12	Laurens County	8
Colquitt County	14	Lee County	11
Columbia County	9	Liberty County	17
Cook County	15	Lincoln County	9
Coweta County	6	Long County	17
Crawford County	7	Lowndes County	15
Crisp County	11	Lumpkin County	2
Dade County	1	Macon County	11
Dawson County	2	Madison County	5
Decatur County	14	Marion County	11
DeKalb County	18	McDuffie County	9
Dodge County	8	McIntosh County	16
Dooly County	11	Meriwether County	6
Dougherty County	14	Miller County	14
Douglas County	3	Mitchell County	14
Early County	14	Monroe County	7
Echols County	15	Montgomery County	13
Effingham County	17	Morgan County	5
Elbert County	5	Murray County	1
Emanuel County	13	Muscogee County	10

County Area

Newton County	18
Oconee County	5
Oglethorpe County	5
Paulding County	3
Peach County	8
Pickens County	1
Pierce County	16
Pike County	6
Polk County	3
Pulaski County	8
Putnam County	7
Quitman County	10
Rabun County	2
Randolph County	10
Richmond County	9
Rockdale County	18
Schley County	11
Screven County	13
Seminole County	14
Spalding County	6
Stephens County	2
Stewart County	10
Sumter County	11
Talbot County	10
Taliaferro County	9
Tattnall County	13
Taylor County	11
Telfair County	12
Terrell County	11
Thomas County	14
Tift County	15
Toombs County	13
Towns County	2
Treutlen County	13
Troup County	6
Turner County	12
Twiggs County	7
Union County	2
Upson County	7
Walker County	1
Walton County	5
Ware County	16
Warren County	9
Washington County	9
Wayne County	16
Webster County	11
Wheeler County	13
White County	2
Whitfield County	1
Wilcox County	12
Wilkes County	9
Wilkinson County	7
Worth County	11



Special Olympics
Georgia

SECTION D -2 MAINTAINING A LOCAL PROGRAM

OPENING AN AREA OR COUNTY ACCOUNT

All financial institutions must be FDIC insured.

- 1-Prior to opening a Special Olympics Georgia checking account, a Management Team must be formed and working.
- 2-In order to open an account at most banks, three forms need to be completed:
 - a-Corporate Resolution,
 - b-Deposit agreement,
 - c-and Signature Card (sometimes the deposit agreement and signature card are combined).
- 3-The account must be opened by listing the name of the corporation first (Special Olympics Georgia, Inc.) then your area/county name, with a dash dividing the two. Examples: Special Olympics Georgia, Inc. -Area #1 Special Olympics Georgia, Inc. -Polk County
- 4-Instruct the bank that you would like to have your bank statement cut off as of the **last day of the month**. This will make monthly reporting much easier.
- 5-Two required names on the signature card are the CEO of Special Olympics Georgia and your Regional Manager. Other recommended names on the bank forms are:
 - a-Chairperson of the Area/County Management Team
 - b-Treasurer/Financial Chairperson of the Area/County Management Team
 - c-Special Olympics Local Coordinator

(These names must be a person who holds a chair position on the management team.)
Also keep in mind, that 2 signatures are required for all transactions/checks.)
- 6-**DO NOT** complete the Corporate Resolution. It should only be signed by the people who are listed on the signature card.
- 7-Sign the Corporate Resolution, Deposit Agreement, and Signature Card with the names and titles of the persons who will be authorized to sign checks and mail all three forms to the SOGA Atlanta or Valdosta Office. The Corporate Resolution will then be completed by the SOGA Office since the information being requested pertains to the corporation, not the individual area/county.
- 8-Forms will be signed and sealed by the CEO and Regional Manager, and returned directly to the bank.
- 9-All savings accounts, money market accounts or CD's must be opened using the same procedures.

10-A financial package will be mailed to the Treasurer upon request or may be found on SOGAnet.

Update the signature cards and corporate resolutions as changes occur throughout the year. Remember always use the above procedure when doing so.

*****IMPORTANT It is a conflict of interest for the Local Coordinator or any SOGA office employee to also serve as Treasurer of a local or area program*****

SPECIAL OLYMPICS GEORGIA, INC. ACCOUNT CATEGORIES

Revenue

40100 Transfer of Funds	40900 General Contributions
40200 Foundation Contributions	42050 Fund Raising Project Income
40400 Individual Contributions	42100 Grants
40600 Corporate Contributions	42300 Interest Income
40700 Employee Club Contributions	43100 Other Revenue
44000 Sale of Merchandise	

Expenses

50000 Salaries	91010 Games – Meals
58100 Office supplies	91020 Games – Equipment
60000 Telephone Expense	91030 Games – Supplies
61030 Postage Shipping	91040 Games – Travel
61040 Postage Stamps	91050 Games – Housing
62100 Storage Space Rent	91060 Games – Entertainment
63100 Equipment Maintenance Expense	91070 Games – Awards
64200 Printing/Copying	91080 Games – Uniforms
64300 Photography	91090 Games Registration
68200 Bank Charges	92500 Food/Beverage (meetings)
69100 Public Relations Expenses	92550 Hotel
69300 Contracted Services	92600 Travel (air and mileage)
69600 Miscellaneous Expenses	92700 Registration (conference/clinics)
69800 Fund Raising Expense – General	99200 Local Grants to Local Programs
69820 FR Expense – Merchandise to Sell	99990 Transfer of Funds (explain)
69830 Volunteer Recognition	
73000 Special Events	

SPECIAL OLYMPICS GEORGIA, INC. ACCOUNTING PROCEDURES

Implementation

The SOGA Office will provide each Treasurer with the following supplies:

Monthly reporting envelopes
Bank Reconciliation Sheets
Revenue Summary Sheets
Cash Proof Sheets
Expense Summary Sheets
Investment Account Sheets
Receipt Forms

Check Authorization Forms

For additional forms or assistance, please call the Program Services Manager at 770-414-9390 or 800-866-4400, extension 114.

Reporting

All cash receipts (i.e., contributions, fund raising events, grants, etc.) must be separately entered on a Special Olympics Georgia Receipt Form. The receipt information is listed on the Revenue Summary Sheet and forwarded monthly to the SOGA Office.

All expenditures must be listed monthly on the Expense Summary Sheet and forwarded monthly to SOGA.

*****Financial Reports for all Areas and Agencies are required each month*****

Our Auditor requires that the following forms be received in the SOGA office by the 15th of each month following the month being reported.

- 1-Revenue Summary Sheet
- 2-Expense Summary Sheet
- 3-Bank Reconciliation Sheet
- 4-Cash Proof Sheet
- 5-Copy of Bank Statement

This monthly reporting process is to be followed by each treasurer/ financial chairperson responsible for program support and fund raising services within Georgia. *If there is no activity in the account for a month, you must still submit a Cash Proof Sheet, Bank Reconciliation Sheet, and a copy of your Bank Statement. Write "No Activity" on the top of the forms, and fill in the Area #.*

Receipts

All income (cash and checks) must be deposited in the **bank** before it is spent.

Recording of Monies:

All cash income must be deposited and recorded at the source level where the money is received (i.e., if a donation is given for an Area Program, the receipt should be written by the Treasurer, Chairperson or Special Olympics Coordinator).

All funds received each month must be recorded and reported in that month.

Receipt Form: A receipt must be written for the recording of all monies received by the Special Olympics Georgia Program. The white original is to be given to the Donor and the yellow copy should be attached to your copy of the bank deposit and filed in your monthly financial folder. See receipt form below.

REVENUE SUMMARY SHEET

The purpose of the monthly Revenue Summary Sheet is to provide the SOGA office and the local or area program a record of revenue received during the month.

The following describes how the Revenue Summary Sheet is completed, including definitions and examples of titles used on the sheet.

Date Received:

This column is used to show the date that the receipt was written and should be the same as listed on the receipt.

Source of Funds: This column is used to describe the source of the revenue. If the source is an individual who gave a general contribution, write the individual's name on the source line. If a general contribution was received from an organization, write the organization's name rather than the individual (i.e., American Legion #35, not Robert Jones). If this revenue is money from a fundraiser, then write the name of the fund raising program in the source line (i.e., Dogwood Tree Sales).

Please list, on the reverse side, the name and address of any contributor donating \$500 or more.

Account Category Number: This column is used to report the account category number that best describes the source of revenue (see Chart of Account Categories). If uncertain which account code, be sure to include a detailed written explanation of the source of revenue.

Amount:

This amount reflects the total amount on the written receipt.

Amount of Deposit:

The figures for this column are subtotals of the amount column and should agree with your deposit slips.

Deposit Date:

This column is used to show the date that the deposit was made and should be the same date as listed on the deposit slip.

Receipt Number:

Attach receipt forms voided or spoiled during the month.

Daily or Periodically:

Daily, or when necessary during the month, receipts written are recorded on the Revenue Summary Sheet.

Record the information from the receipt to the Revenue Summary Sheet. The procedure to follow is: Note on the Revenue Summary Sheet the date that the receipt was written, the source of the donation, the account category number relative to the source of the donation, and the amount of the receipt. As each deposit is made, record the date and the amount as listed on the deposit slip.

Monthly:

At the end of each month, prior to sending your Revenue Summary Sheet to the SOGA office, total the amount listed in the AMOUNT and the AMOUNT OF DEPOSIT columns. To check if your work is correct, the total listed in the AMOUNT column and the total listed in the AMOUNT OF DEPOSIT column should be equal. These totals should also agree with the total of all monthly deposit slips.

EXPENSE SUMMARY SHEET

The purpose of the monthly Expense Summary Sheet is to provide the SOGA office, as well as the management team, a record of invoices paid during the month.

The following describes how the Expense Summary Sheet is to be filled out, including definitions and examples of titles used on the sheet.

IMPORTANT NOTE: *The Expense Summary Sheet is not to be completed from your bank statement. When this is done, the checks that are outstanding will not be recorded and will create problems on next month's report. Also, it does not give a correct report for the month.*

Date:

This column is used to show the date that the invoice was paid. This date must correspond to the month in which you actually paid the invoice.

Check Number: This column is used to record the check number from the check written to pay the invoice. Post all checks written, including voided checks. List checks in numeric order. *(It is important that the check # be kept in numeric order so that all check #'s can be accounted for.)*

Check Issued to:

This column is used to describe to whom the check was written. (For example, if you received an invoice for 5 soccer balls, you would list on the FOR COLUMN – Games Supplies and the ACCOUNT CATEGORY #-91030.

Amount:

This column reflects the total amount of the check written.

Daily or Periodically:

Daily, or when necessary during the month, record the invoices paid on the Expense Summary Sheet.

Record the information from the invoices and the checkbook and post to the Expense Summary Sheet. Follow the following procedure:

Complete the Area number, County and month on the form, record the check number from the checkbook. Record where the items were purchased and the account category number of the item(s). List the amount of the invoice.

Monthly: At the end of each month, but before you send the Expense Summary Sheet to the SOGA office, total the amount column. All checks written each month must be recorded and reported that month.

Paid Invoices

There must be an invoice or expenditure receipt for each check written.

Under no circumstance shall a check be made payable to cash. All checks shall be written to a company or individual in exchange for goods or services received.

1. The invoice is coded to the appropriate budget account.
2. A check authorization form is prepared.
3. A check is prepared by the treasurer/financial chairperson, the invoice is stamped paid and the check number is written on the invoice.
4. Check and authorization forms are signed by two authorized officers and each invoice is initialed.
5. The check is posted according to the designated budget account in the general ledger if one is being kept.

Check Authorization form is to be stapled to the front of the corresponding invoice and kept on file in check numerical order.

Bank Reconciliation Sheet

The purpose of the Bank Reconciliation Sheet is to provide the SOGA office, as well as the management team, reassurance that the bank statement balance reconciles with the checkbook balance. A & B of the Bank Reconciliation Sheet should agree with C on the Cash Proof Sheet.

NOTE: If A, B & C do not agree, an error has been made and you need to recheck your figures (it may be due to the deposits and /or checks not clearing in the month you're reporting).

- 1 Balance on the Bank Statement
Use the Bank Statement Ending Balance.
- 2 Add Deposits in Transit Column
Make sure you list any outstanding deposits/checks from the previous month and the month you're presently reporting if they have not cleared the bank statement.
- 3 Add Outstanding Checks Column
- 4 To Calculate the (A) Line Balance
Take the Bank Statement Balance and add it to the deposits in transit total (if any) and subtract the Outstanding Checks total to get the (A) line balance.
- 5 Balance in Checkbook at Month End
Be sure to use the ending balance in your checkbook.
- 6 Add Deposits Not Recorded
Use this section in case you have forgotten to list a deposit from a previous month or if the bank has reported interest that you have not recorded in your checkbook.
- 7 Deduct Service Charges Not Recorded
Use this section if the bank has reported any service charges that you have not recorded in your checkbook.
- 8 Adjustments
This section is for making adjustments if the bank has recorded a figure different than what you had written in your checkbook.
- 9 To Calculate the (B) Line Balance
Add the Checkbook Balance to the deposits not recorded and then subtract the service charges not recorded and add or subtract the adjustments to get the (B) Line Balance.

Cash Proof Sheet

The purpose of the Cash Proof Sheet is to provide the SOGA office, as well as your management team, a summarized total of Revenues and Expenses to get the new Ending Balance for the month being reported.

- 1-The first line is the balance from the previous month that will be carried over to the current month.
- 2-The second line is the total of revenue from the Revenue Summary Sheet.
- 3-The third line is the total of expenses from the Expense Summary Sheet.
- 4-The fourth line is figured by taking the Beginning Balance and adding it to the total of Revenue and then subtracting the total expense to get the new Ending Balance on Line C. Line C must agree with lines A & B on the Bank Reconciliation Sheet.

Investment Account

The purpose of the Investment Account is to help the SOGA office and your management team to facilitate the tracking of investments.

- 1-List the Revenue in the top boxed section, such as, interest earned or funds being transferred **into** the investment account.
- 2-List the Expenses in the bottom boxed section, i.e., service charges or funds being transferred **from** the investment account into another account.

NOTE: Investment Accounts must be reported quarterly regardless of whether there was activity in the accounts.

NOTE: The CEO must have signature authority over all accounts.

INVESTMENT ACCOUNT SCHEDULE

1 ST Quarter Activity (January, February, March)	April 15 th
2 nd Quarter Activity (April, May, June)	July 15 th
3 rd Quarter Activity (July, August, September)	October 15 th
4 th Quarter Activity (October, November, December)	January 15 th

FINANCIAL REPORTING AND ACCOUNTABILITY PROCESS

In order for the Special Olympics Georgia Program to keep its accreditation, Special Olympics Incorporated mandates that all accounts are in full compliance with SOI general rules. These rules are as follows:

- 1-State Program must have signature power over all local/area/torch run/state games accounts.
- 2-State Program must receive monthly financial reports from all area accounts.
- 3-State Program must have combined results for year end audit.

All reports submitted to the state office are reviewed. Incomplete or incorrect reports will be returned for completion or correction, and will not be considered filed until complete and correct.

The following timetable has been established to ensure that we remain in full compliance.

- On the 15th of each month all financial reports for the previous month are due at the State Office
- At the end of each month, the Regional Manager will be notified of any area/agency accounts that are past due
- After 45 days from the due date, a reminder email will go out to the Regional Manager reminding them of the past-due situation.
- After 60 days from the due date, a letter will go out to the area/agency from the CEO reminding them of the past due situation. (cc: to the Local Coordinator, Regional Manager, Vice President of Program Services, Director of Business Administration and CEO)
- **After 120 days from the due date, the Regional Manager will recall the account and all of its files. Refusing to hand over the account will result in its closure. The account will return to the State Office where it will be reconciled and maintained by the Program Services Manager. A maintenance fee of \$10 per month will be charged to the account until a new treasurer is in position and is ready to take the account back.**

Be sure to have mail forwarded to you during the summer months. If there are any special circumstances that would prevent you from meeting this deadline, please discuss this with the Program Services Assistant.

Credit/Debit Card Policy

SOGA does not authorize any of its programs to hold credit/debit cards.

Policies Regarding Salaries

All salaries must be approved by the CEO of Special Olympics Georgia, Inc.

Salary Policy For Local Coordinators

A Local Coordinator may receive a salary as voted on by their accredited Management Team and approved by the CEO of Special Olympics Georgia to be paid from the Local Special Olympics account. The amount cannot exceed \$1500 annually.

Also, if the amount the Local Coordinator receives exceeds \$599, Special Olympics Georgia, Inc. will report the income in the form of a 1099 to the Internal Revenue Service.

There must be enough money in the account to pay out the approved salary. If the amount in the account falls short of the amount agreed upon, the individual forfeits pay for that pay period. The agreement is between the individual and the management team and in no way is Special Olympics Georgia, Inc. responsible for paying the salary.

Salary Policy for Management Team Members

Management Team members are strictly volunteer positions.

Treasurer Policy

Due to the sensitive nature of the position, SOGA reserves the right to perform background checks on all treasurers. Any treasurer refusing a background check will be removed from that position. Additionally, SOGA reserves the right to remove treasurers from volunteer positions.

Be Informed Through SOGA's Private Intranet

How does it work?

Step 1: Log on to <http://soga.onlineintranets.com> or click on the Related Links section of the SOGA website www.specialolympicsga.org

Step 2: Your user name and password are your area and number in lower case, example: area01

Step 3: On the main page of the Intranet, go to "Documents" section to find tutorials on every aspect of the Intranet.

Step 4: Add your events, opinions and announcements. *Any questions? Ask your Regional Manager*

SPECIAL OLYMPICS GEORGIA, INC. CASH PROOF SHEET

2000 Dekalb Technology Parkway Building
400, Suite 400 Atlanta, Georgia
30340

Phone: 770-414-9390/Fax: 770-216-8339

www.specialolympics.org

Area #: _____

Month Ending: _____

Agency: _____

Treasurer: _____

Fund Code: _____

Daytime Phone / Email: _____

Ending Balance as Shown on Previous Cash Proof Sheet \$ _____

Add Total Deposits from REVENUE SUMMARY SHEET (A) \$ _____

Deduct Total Disbursements from EXPENSE SUMMARY SHEET (B) \$ _____

Ending Balance (C) \$ _____

THE SAME FIGURE SHOULD APPEAR ON LINES A, B AND C OF THE BANK RECONCILIATION SHEET AND THE CASH PROOF SHEET.

PLEASE SUBMIT YOUR MONTHLY REPORTS BY THE 15TH IN THE FOLLOWING ORDER:

- . •CASH PROOF SHEET
- . •REVENUE SUMMARY SHEET
- . •BANK RECONCILIATION
- . •BANK STATEMENT

Internal Revenue Service

Date: October 4, 2004

Special Olympics Georgia, Inc.
4000 Dekalb Technology Parkway Building 400
Suite 400
Atlanta, GA 30340-5668

Department of the Treasury
P. O. Box 2508
Cincinnati, OH 45201

Person to Contact:

Kathy Masters ID# 31-04015
Customer Service Representative

Toll Free Telephone Number:

8:00 a.m. to 6:30 p.m. EST
877-829-5500

Fax Number:

513-263-3756

Federal Identification Number:

23-7201676

Dear Sir or Madam:

This is in response to your request of October 4, 2004, regarding your organization's tax-exempt status.

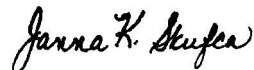
In March 1977 we issued a determination letter that recognized your organization as exempt from federal income tax. Our records indicate that your organization is currently exempt under section 501(c)(3) of the Internal Revenue Code.

Our records indicate that your organization is also classified as a public charity under sections 509(a)(1) and 170(b)(1)(A)(vi) of the Internal Revenue Code.

Our records indicate that contributions to your organization are deductible under section 170 of the Code, and that you are qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Internal Revenue Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely,



Janna K. Skufca, Director, TE/GE
Customer Account Services



SECTION E COACHING

SPECIAL OLYMPICS GEORGIA WEEKEND TRAINING CLINICS

Contact: Sr. Coach Education and Program Manager
Special Olympics Georgia
4000 Dekalb Technology Parkway
Suite 400, Building 400
Atlanta, Georgia 30340
1-800-866-4400 or (770) 414-9390 ext. 122 (770) 216-8339 fax

What is a Coach's Clinic?

Training clinics allow people interested in Special Olympics to learn about coaching athletes in a specific sport. Coaches generally attend a clinic in the sport(s) of their choice and then train athletes in their local areas. The athletes then are able to participate in Special Olympics competition as well as local programs. Clinics are usually attended by an average of 10-15 coaches per sport. The sports offered depend on Special Olympics seasons and scheduled competitions.

Objectives for Weekend Training Sessions:

- To provide training sessions for athletes and coaches in a variety of sports.
- To provide sessions in appropriate, conveniently located sites around the state.
- To provide quality instruction to coaches by enlisting the assistance of sport specific "experts" on the college and professional coaching and playing level.
- To provide the opportunity for the volunteer coaches to become certified by Special Olympics Incorporated, the International Organization.
- To provide the proper skills to coaches which will allow Special Olympics athletes quality training which ultimately will enhance the quality of competition around the state.

Hosting Weekend Training Sessions Provides:

- Opportunity for local coaches and coordinators to become certified in specific sport.
- Opportunity for University to become involved in training at various levels:
- Provide facilities for sport specific training
- Provide clinicians for sport specific training
- Provide volunteer opportunities for students and faculty
- Provide instruction to Special Olympics coaches and athletes on various prevention, diet and nutrition, etc.
- Opportunity for exposure to athletes with a variety of abilities and disabilities

COACH'S CONDUCT & JOB REQUIREMENTS

10 CHARACTERISTICS OF COACHES

Ten Characteristics of Highly Successful Coaches from the US Olympic Committee Coaching Development Office

1. Committed to individual integrity, values, and personal growth.
2. Profound thinkers who see themselves as educators, not just coaches.
3. Well-educated (formally and informally) in a liberal arts tradition.
4. Long-run commitment to their athletes and their institution.
5. Willing to experiment with new ideas.
6. Value the coach-player relationship, winning aside.
7. Understand and appreciate human nature.
8. Love their sport and work.
9. Honest and strong in character.
10. Human and therefore imperfect.

WHAT IS SUCCESS?

*What is success?
To laugh often and much;
To win the respect of intelligent people
And the affection of children;
To earn the appreciation of honest critics
And endure the betrayal of false friends;
To appreciate beauty;
To find the best in others;
To leave the world a bit better, whether by
a healthy child, a garden patch
or a redeemed social condition;
To know even on life has breathed
Easier because you have lived;
This is to have succeeded.
---Ralph Waldo Emerson*

LEVELS OF EDUCATION

General Orientation

or General Session

45 minutes

Introduction to Special Olympics

- Mission
- Philosophy
- Uniqueness
- Eligibility Requirements

Coaching SO Athletes Seminar

4-6 hours

***Basic Insight into the SO
Athlete's Learning Process***

- Utilizing Your Skill Effectively with the SO Athlete

Skills Course

6 hours

Basic Sports Skills and Strategies

- Current Techniques
 - Sport Rules
 - Design a Training Plan
 - Basic Skills Progression
 - Effective Utilization of Time
-
- **Principles of Coaching Course**
 - 6-8 hours
-
- ***Expanding the Sport Sciences***
 - Preparing Your Athlete Physically and Mentally
 - Investigate Your Coaching Philosophy
 - Tips on Planning and Administration

ONLINE TRAINING MATERIALS

Sports Coach	www.brianmac.demon.co.uk
Online Running Coach	www.sportscoach.com.au
Coaching Youth Sports	www.chre.vt.edu/~cys/
American Volleyball Coaches Association	www.avca.org
Sports Parents	www.sportsparents.com
Kick Sports	www.kicksports.com
Complete Soccer Academy	www.futbolmundial.com
Secrets to Great Skating	http://members.aol.com/sk8secrets/
Proteacher	www.proteacher.com
Sluggers Sport	www.sluggers-sports.com/coach/coach.html
Track Coach.com	www.trackcoach.com/tips/tips.html
Walking Wellness Online-Stretching	www.racewalk.com/wwbook/nm00004.html
Sports resource	http://about.com
Teaching Kids Golf	www.teachkidsgolf.com
Volleyball Coaches Corner	http://hypbus.com
Volleyball Coaches Corner	www.vball.net
Conditioning	www.parformancecondition.com
Nat'l Soccer Coaches Assoc..	www.nscaa.com

MANDATORY SCREENING



All individuals (18 and over) responsible for athletes overnight must clear a background screening before attending State Games.

No person under the age of 18 will be screened. If an individual is not 18 years of age and is considered a coach or assistant coach, he or she will be required to fill out a Volunteer Coach and Profile Form. It must be noted at the top of the form "MINOR". A minor's SS# is not required on the form.

If the "minor" is a Unified Partner, he or she must have a completed Partners Form on file with Special Olympics Georgia by the eligibility deadline.

Any "minor" attending games – as a coach, assistant coach, or Unified Partner --MAY NOT be responsible for athletes overnight. An individual, over the age of 18, that has a clear background screening before attending State Games, must be responsible for the athletes overnight in the hotel / dorm rooms.

POLICY CONCERNING COACHES / ASSISTANT COACHES

◆ This policy applies to all State Games with the exception of the Horse Show. ◆ All coaches / assistant coaches / nurses / bus drivers / etc. who are a part of an agency's official delegation will be assessed a fee of \$12 per person to attend State Games. ◆ The official agency delegation will consist of athletes / partners, plus the following allotment of coaches / assistant coaches / bus drivers / nurses / etc.

◆ TEAMS – 3 coaches per team allotted for floor hockey teams, softball teams, basketball teams, volleyball teams, and soccer teams.

1 coach per team allotted for bowling and bocce.

◆ INDIVIDUAL SPORTS –
1 coach per 3 athletes allotted.

◆ WHEELCHAIR & LEVEL A
ATHLETES 1 coach per 1 athlete
allotted.

◆ ADDITIONAL – 1 additional coach will be added to your allotment to be utilized as necessary by your agency.

HOTEL HOUSING: Special Olympics Georgia houses 4 persons per room

DORM HOUSING: Special Olympics Georgia houses 1 person per bed, up to 4 persons per room.

*******STATE GAMES***** *****LATE GAMES PAPERWORK POLICY*******

- *All State Games Paperwork is due in the State Office no later than 5:00pm on the deadline date.*
- *Paperwork received in the State Office up to 3 days after the deadline will be accepted as follows:*
 - o *For paperwork that is received after the deadline date or up to 3 days after the deadline date, the agency will be assessed a \$100 late fee.*
 - o *After 3 days, NO GAMES PAPERWORK WILL BE ACCEPTED.*
 - o *The \$100 late assessment fee is due in the State Office by the Problem Sheet deadline date for State Games.*
 - o *Agencies failing to pay the \$100 late assessment fee by the Problem Sheet deadline date will be unable to attend the State Games.*

PLEASE MAKE EVERY EFFORT TO GET IN ALL PAPERWORK BY THE DEADLINE FOR ALL STATE GAMES.

***** PLEASE NOTE: THIS POLICY DOES NOT APPLY TO THE ELIGIBILITY DATE FOR MEDICAL FORMS AND PARTNER FORMS. THESE FORMS MUST BE TURNED IN BY THE ELIGIBILITY DEADLINE FOR ALL STATE GAMES.*****

REMEMBER: NO faxed paperwork will be accepted!!

Coaches Clinic Request Form

Date of Request: _____

Area: _____

Contact Name: _____

Phone Number: _____

E-Mail Address: _____

Sport(s): _____

Preferred day / time of clinic (circle preference):

1. **1.** Monday – Friday Daytime Evening Both (2 in one day)
2. **2.** Saturday Morning Afternoon Both (2 in one day)

3. Sunday Morning Afternoon Both (2 in one day) **Dates:** _____

(List 3 dates that the clinician can choose from -2 months from date of request)

Facility (must be sport appropriate): _____

Number of potential coaches that will attend: _____

Guideline for Months Clinics will be offered:

January – April (training for Summer Games): Aquatics, Soccer, Volleyball, Badminton, Table Tennis, Athletics, Artistic Gymnastics, Tennis

May – July (overall training and Masters Bowling): Sports Camp (multiple sports clinics will be

offered), Bowling **July – September (training for Fall Games):** Cycling, Golf, LD Run / Walk, Bocce,

Softball **August – October (training for Sailing / Equestrian):** Sailing, Equestrian **September –**

November (overall training and Winter Games): Leadership Conference (multiple sports clinics will be offered), Basketball, Bowling, Ice Skating, Floor Hockey, Rollerskating, Powerlifting, Rhythmic Gymnastics

SOGA USE ONLY:

Regional Manager Signature: _____ Date Received: _____

Sports Manager Signature: _____ Date Received: _____

Training Approved: _____Yes _____No (state reason) Date Approved: _____

Date Clinic Flyer distributed to Regional Managers: _____

Name of Clinician: _____

Number of Registrations returned for Clinic: _____

Final Attendance: _____#Coaches _____#Athletes as Assistant Coaches 12/7/06

ATHLETES AS ASSISTANT COACHES



The following are guidelines for athletes to become Assistant Coaches. We are proud to announce that we do have athletes that are striving to become coaches. Please follow the guidelines closely.

- The athlete must attend a coaching clinic in the desired sport.
- The athlete must complete a Volunteer & Coach Profile form.
- The athlete must receive **20** practicum hours coaching athletes in the sport (must be under the supervision of a head coach). NOTE: The athlete must complete 20 hours, not 10.
- The athlete must sign the "Signature of Applicant" line.
- The head coach that supervised the athlete must sign the "Practicum Supervisor" line.
- The "Practicum Supervisor" must review all information and send the Application for Sports Training Certification form to the following address:

Special Olympics Georgia
4000 Dekalb Technology Pkwy.
Bldg. 400, Ste. 400
Atlanta, GA 30340

Any athlete that goes through a sport specific coaching clinic will be classified as an Assistant Coach. No athlete can serve as a Head Coach. They will be Assistant Coaches ONLY.

SPECIAL OLYMPICS GEORGIA EVALUATION

AREA EVENT:

DATE:

AREA / LOCAL DIRECTOR:

LOCATION:

FACILITY: _____

Number of athletes: _____

SPORTS OBSERVED: _____

Evaluator: _____

COMMENTS: _____

Please write your comments/impressions on each aspect listed below:

Overall Facility:

- Facility open and available _____
- Adequate seating and spectator area ___ __
- Parking was adequate ___ __
- Sound system was available and was used ___ __
- Tents/ Shading were available _ ____
- Restrooms were available _____
- Concessions were available _____

Registration:

- Pre-games forms were used ___ __
- Pre-games timelines for forms was adequate ___ __
- Athlete Rosters were available _____
- Heat sheets available as needed _____

Opening Ceremonies:

- Banners were visible _____
- Volunteers, agencies, etc. were recognized ___ __
- Sound system was used adequately ___
- Announcer was very enthusiastic _____
- Ceremony started on time and flowed smoothly _____
- Parade of Athletes and agencies announced _ ____
- Athlete Oath used _ ____
- Flag presentation and National Anthem _ ____
- Athletes part of opening ceremonies _____

Competition:

- Signage visible at event locations _____
- Rules Committee ___ __
- Appropriate sports facilities were used ___ __
- Event directors were easily identified / Local Coordinators ran events ___ __
- Official SOI / SOGA events offered _____
- Divisioning completed prior to event ___ __
- Heats grouped by gender age & ability with fair chance to win ___ __
- Adequate number Timers/Score keepers _____
- Ability of Officials _____
- Other: _____

Medical:

- Trained medical personnel available and visible _ _____
- Medical Release forms on site _____
- Phone / Radio access for emergencies __ __
-

Communications:

- 2-way radios _____
- Mobile phones __ __
- Venue Announcements (P.A System) __ __
- Nerve Center set up __ __

Awards:

- Awards organized and available at all stations _ _____
- Ceremonial Presentation __ __
- Award stands used and decorated __ __
- P. A. System & music used __ __
- Adequate Spectator/Family viewing area _ _____

Hospitality:

- Family Registration & Reception area _____

Volunteers:

- Adequate & Easily Identified _____
- Trained to perform assignment __ __

Public Relations:

- Television/ Print / Radio coverage _____
- Press Releases/Media Alerts sent out _____

- Post Games Articles written __

Summary: _____

—

SPECIAL OLYMPICS GEORGIA PROTEST FORM

MUST BE SUBMITTED TO THE RULES COMMITTEE MEMBERS NO LATER THAN 15 MINUTES AFTER THE CONCLUSION OF THE COMPETITION BEING PROTESTED

DATE: _____ **TIME FORM SUBMITTED:** _____

SPORT: _____ **EVENT:** _____

AGE GROUP: _____ **DIVISION (HEAT):** _____

AREA _____ **AGENCY** _____

EXPLANATION OF PROTEST: _____

SIGNATURE OF HEAD COACH: _____

PROTEST APPROVED: _____ **PROTEST DENIED:** _____

EXPLANATION OF RULES COMMITTEE: _____

SIGNED: _____ **TIME OF DECISION:** _____



Special Olympics
Georgia

SECTION F TRAINING

GAMES INFORMATION

STATE WINTER GAMES (COMPETITIONS)

BASKETBALL (TEAM, TEAM SKILLS, INDIVIDUAL SKILLS)
BOWLING (SINGLES//TEAM-Athletes 21 & younger)
FLOOR HOCKEY (TEAM & INDIVIDUAL SKILLS)
GYMNASTICS-ARTISTIC
ICE SKATING (FIGURE & SPEED)
POWERLIFTING
ROLLER SKATING

STATE SUMMER GAMES (COMPETITIONS)

AQUATICS
ATHLETICS
BADMINTON
GYMNASTICS-RYTHMIC
SOCCER (TEAM & INDIVIDUAL SKILLS)
TABLE TENNIS
TENNIS (SINGLES, DOUBLES, SHORT COURT, & INDIVIDUAL SKILLS)
VOLLEYBALL TEAM

STATE FALL GAMES (COMPETITIONS)

BOCCE
CYCLING
GOLF (9 HOLE, 18 HOLE, & INDIVIDUAL SKILLS)
LONG DISTANCE RUNNING//WALKING
SOFTBALL (TEAM & INDIVIDUAL SKILLS)

SOUTHEAST REGION GAMES

ALPINE SKIING / SNOW BOARDING
POWERLIFTING
SAILING
TENNIS
ICE SKATING – FIGURE / SPEED

STATE HORSE SHOW

DRESSAGE
TRAIL

EQUITATION UNIFIED

MASTER'S BOWLING

SINGLES

TEAMS

SPORT INFORMATION CHEAT SHEET

Sport/Class	Training Books	Length of Clinic	NGB	Contact NGB	Local NGB Contact	NGB Print Date
Alpine Skiing			US Ski Association	PO Box 100; Park City, UT 84060; 435-649-9090; www.ussa.org		
Aquatics	SOI		USA Swimming	One Olympic Plaza; Colorado Springs, CO 80909; 719-578-4578; 719-578-4669 Fax; www.usa-swimming.org		
Artistic Gymnastics	SOI/		USA Gymnastics	Pan American Plaza; Suite 300; Indianapolis, IN 46225; 317-237-5050; usa-gymnastics.org		
Badminton	SOI		USA Badminton	One Olympic Plaza; Colorado Springs, CO 80909; 719-578-4808; 719-578-4507 Fax; www.usabadminton.org		
Basketball	SOI		National Federation of State High School Associations	PO Box 20626 (64195-0626); 11724 NW Plaza Circle, Kansas City, Missouri 64153-1158; 816-464-5400; 816-464-5571 Fax; www.nfhs.org		
BMX			National Bicycle League			
Bocce	SOI		NA--SOI Rule Book			
Bowling			American Bowling Congress/Women's Intenational Bowling Congress	5301 South 76th; Greendale, WI 53129; 414-421-6400; www.bowl.com		
Cycling			US Cycling Federation	One Olympic Plaza; Colorado Springs, CO 80909; 719-578-4581; 719-578-4628 Fax; www.usacycling.org		
Distance Running/Fitness Walk			NA--SOI Rule Book under Athletics			

astrian	SOI	American Horse Shows Associations	Suite 409; New York, NY 10017-5806; 212-972-2472; www.ahsa.org	
re ing	SOI	US Figure Skating Association	20 First Street; Colorado Springs, CO 80906; 719-635-5200; www.usfsa.org;	
r key	SOI	NA--SOI Rule Book		
	SOI	US Golf Association	Liberty Corner Road; Far Hills, NJ 07931; 908 234-2300; www.usga.org	1827 Powers Ferry Road SE; Atlanta, GA; 770 951-076
erlifting	SOI	USA Powerlifting	124 West Van Buren Street; Columbia City, IN 46725; 219-248-4889; www.usapowerlifting.com	
hmic nastics	SOI	USA Gymnastics	Pan American Plaza; Suite 300; Indianapolis, IN 46225; 317-237-5050; usa-gymnastics.org	
er ing	SOI	USA Rollerskating	1500 South 70th Street; PO Box 6579; Lincoln, NE 68506; 402-483-7551	
ng	SOI	US Sailing Association	15 Maritime Drive; Post Office Box 1260; Portsmouth, RI 02871; www.ussailing.org	
er	SOI	US Soccer Federation	1750 East Boulder St; Colorado Springs, CO 80909; 719-578-4678; www.us-soccer.com	Georgia State Soccer Association 3684 Stewart Road; Doraville, GA; 770 452-050
ball	SOI	Amateur Softball Association/USA Softball	2801 NE 50th Street; Oklahoma City, Oklahoma 73111-7203; 405-424-5266; 405-424-3855 Fax	
ed ing	SOI	US International Speed Skating Association	17060 Patricia Lane; Brookfield, WI 53005; 800-334-7981	
e sic	SOI	USA Table Tennis	One Olympic Plaza; Colorado Springs, CO 80909; 719-578-4583; www.usatt.org	

Tennis		US Tennis Association	70 West Red Oak Lane; White Plains, NY 10604-3602; 914-696-7000; usta.com	2300 Peachford Rd; Dunwoody, GA; 770-451-8520
Athletics		USA Track & Field	PO Box 120; Indianapolis, IN 46206; 317-261-0500; 317-261-0481 Fax; www.usatf.org	
Volleyball		USA Volleyball	715 South Circle Dr.; Colorado Springs, CO 80910-2368; 719-228-6800; www.usavolleyball.org	



Special Olympics
Georgia

SECTION G POLICIES AND INSURANCE

ATHLETE ELIGIBILITY FACT SHEET

15-PASSENGER VAN TRANSPORTATION NOTICE

With the health and safety of the SOGA athletes and volunteers as our top priority, please read the following Special Olympics Incorporated (SOI) policy regarding the use of 15 passenger vans to transport athletes to Special Olympics activities. This policy is the result of much research and discussion with legal, insurance and risk management representatives. Data shows that given the top heavy construction of the 15 passenger van, it is far more susceptible to roll-over accidents that result in traumatic injury and higher death rates to its occupants. For this reason, SOI policy no longer allows Special Olympics Programs to use 15 passenger vans for their activities. A non-Special Olympics organization may choose to use these vans to attend Special Olympics activities, but they do so at their own risk. As an accredited SOI Program, SOGA supports and will follow this policy. Please share this notice with your key administrative personnel. Thank you for your efforts in continuing to provide the safest environment possible for all involved in SOGA.

Special Olympics Programs are prohibited from using 15-passenger vans to transport athletes or other individuals to and from Special Olympics events, and Special Olympics strongly discourages other organizations from using 15-passenger vans to transport people to or from Special Olympics events.

Special Olympics recognizes that it is up to each non-Special Olympics organization to determine whether to use 15-passenger vans. By using 15-passenger vans, a non-Special Olympics organization understands that:

1. Anyone operating a 15-passenger van owned or that is rented by a non-Special Olympics organization for the purpose of transporting Special Olympics athletes or other persons to or from Special Olympics activities is acting as the employee or volunteer of the organization and not on behalf of Special Olympics.
2. The driver's operation of the 15-passenger van is considered to be in the course and scope of the driver's employment or volunteer responsibilities for the non-Special Olympics organization, and should not be on behalf of Special Olympics.
3. Non-Special Olympics organizations that operate 15-passenger vans should comply with the applicable safety standards promulgated by the National Highway Traffic Safety Administration (NHTSA).

SOGA HOTEL/DORM/VENUE EMERGENCY PLAN

In the case of an emergency please respond accordingly.

In the case of a fire/false alarm please make sure your entire delegation calmly vacates the building and that they are all accounted for. Remember to take your keys and your housing list. (The Head of Delegation should make a final sweep of the housing/building counting your athletes/coaches and make sure you have everyone when exiting or re-entering)

In the case of bad weather (tornado, flooding) please make sure your entire delegation is in a secure and safe environment until the weather has cleared. Make sure that each athlete/coach in your delegation is accounted for after the weather has cleared. Remember to take your keys.

In the case of a missing member of your delegation (athlete, coach, family member) please contact the Nerve Center/SOGA Staff as soon as possible. Please calmly provide a detailed description of the situation and adhere to the SOGA Crisis Plan regarding the dissemination of information.

The Nerve Center phone number can be found in your Information Guide

SPECIAL OLYMPICS GEORGIA HAND TORCH POLICY EFFECTIVE MARCH 1, 2004

This policy applies to any Special Olympics Georgia event or competition where a hand held torch is to be lighted. All lighted torch events must adhere to the following.

Only official Special Olympics hand torches may be used.

Official Special Olympics hand torches may be purchased from the following company.

Midwest Trophy Manufacturing Co. Inc. 3405 S. E. 29th Street Del City OK 73115 Attn: Special Olympics
Georgia Sales Representative 1-800-324-5997
www.mwtrophy.com

Special Olympics programs may borrow official hand torches from the State Office when they are available. Please contact your Regional Manager for more details.

Any registered athlete, coach, or volunteer who carries the hand torch should ensure the safety of all those involved as well as the spectators.

The use of an unofficial hand torch is only permitted if it is not lighted.

SOGA suggests that you not loan your hand torch to a non Special Olympics organization/agency.

MEDICAL INCIDENTS FOR STATE GAMES

All venue boxes include the American Specialty First Report of Incident Form. These forms must be filled out any time an athlete, spectator, or volunteer is injured and major medical treatment is necessary, i.e. EMS is called, transport to the hospital or other treatment facility is required, etc.

Medical personnel will keep a log of all treatments throughout the weekend and will provide a copy to SOGA prior to leaving the Games facility.

In the event of a major incident, the Director of Business Administration should be notified as soon as possible after treatment is received.

SPECIAL OLYMPICS GEORGIA HAND TORCH WAIVER OF LIABILITY

- Special Olympics is not being compensated for the use of this torch and does not manufacture this torch. When delivered for use the torch includes instructions from the manufacturer. I am not to use the torch if I have not received, read and understood the instructions, or if the torch appears damaged or broken.
- I accept full responsibility for the open flame and its safe use while the official Special Olympics Hand Torch is in my possession. Although I am requesting the use of the torch related to the organization named below, I am accepting personal responsibility for the safe use of the torch, and am signing this form on my own behalf.
- I accept full responsibility for all uses of the torch that may occur while I am responsible for the Special Olympics Hand Torch. I am responsible for the torch from when it is delivered to my possession until I return it to Special Olympics Georgia. If it is damaged or lost, I will pay the full replacement value of the torch.
- By signing this form I release Special Olympics Georgia and its agents, officers and employees from any and all liability, claims or damages that may arise from the borrowing of the Special Olympics Hand Torch. I will indemnify Special Olympics Georgia against any and all claims, suits or demands brought against Special Olympics Georgia arising from the use of the torch while it is entrusted to me.

Please Return to the State Office by faxing to 770-216-8339.

Date: _____

Signature: _____

Name printed: _____

Area/Agency/Organization: _____

Witness: _____

SPECIAL OLYMPICS GEORGIA CRIMINAL BACKGROUND POLICY

No person with a history of sexual or violent criminal behavior directed at any person may participate in or with Special Olympics Georgia (SOGA) as an athlete, coach, volunteer, staff member or in any other capacity. The CEO of SOGA shall have sole discretion for determining whether a person shall be disqualified from participating in or with SOGA on account of a history of sexual or violent criminal behavior. Athletes will have an appeal process after the CEO has ruled its decision by contacting the Chair of the Board of Directors for further review.

SPECIAL OLYMPICS GEORGIA TELEPHONE, VOICE MAIL, COMPUTER NETWORK, INTERNET ACCESS & E-MAIL ACCEPTABLE USE POLICY

This policy applies to all employees, officers, directors, independent contractors, and affiliates of the Organization.

SPECIAL OLYMPICS GEORGIA EMERGENCY MEDICAL GUIDELINES

A. Medical Emergency Guidelines

1. Purpose: To ensure that The SOGA Medical Team, the event operations staff, venue directors, coaches & the facility security all work together in a manner that will allow for orderly & expedient care of the injured athlete.

2. Procedure: If it appears that an athlete is injured the first response will come from The SOGA Medical Team at the venue. If coaches or volunteers arrive before The Medical Team they should keep the athlete still and calm until The Medical Team arrives. Under no circumstances should anyone other than The Medical Team move or transport an injured athlete before The Medical Team assesses the injured athlete to determine the extent of the injuries and the appropriate level of care.

Security and/or operations personnel will **NOT** attempt to move, transport, or otherwise medically assist the injured athlete. They will focus their attention on maintaining control of the crowd and facilitating the immediate arrival and access of the SOGA Medical Team. The security and operations personnel are vital in assisting with the determination of the extent of the emergency and facilitating the most appropriate entry point by emergency medical assistance, not providing medical care.

3. Evaluation: The SOGA Medical Team will conduct the initial injury evaluation and will make all medical decisions.

If the athlete requires emergency medical transport, the following protocol will be activated:

The SOGA Team will contact Main Medical on the radio and inform them that there is a medical emergency.

Main Medical will get the necessary information from The SOGA Medical Team at the venue.

Main Medical will contact The Emory First Responder Unit and relay the necessary information.

Main Medical will inform the SOGA Medical Team at the venue that First Responders are on the way. 4) **Suggested revision: (The SOGA Medical Team at the venue will relay all information to The Venue Director at an appropriate time)**

Main Medical will dispatch available personnel to the site of the emergency to aid in the entry of The First Responders to the emergency site. All available personnel at the venue will also be utilized to assist with the most efficient route for The First Responders as well.

SOGA Medical Team Responsibilities:

- The SOGA Medical Team initiates Primary Care at the venue.
- The SOGA Medical Team informs Main Medical of the situation and the results of The Primary Survey.
- The SOGA Medical Team determines whether or not EMS is needed
- The SOGA Medical Team institutes first aid measure until assistance arrives.
- **Suggested Revision (The SOGA Medical Team informs The Venue Director of the evaluation and action plan.)**
- The SOGA Medical Team assists EMS as needed.
- The SOGA Medical Team supervises extraction of injured athlete from field.
- The SOGA Medical Team will follow-up on athlete and report the situation to The Nerve Center.

MEDICAL INCIDENTS FOR STATE GAMES

All venue boxes include the American Specialty First Report of Incident Form. These forms must be filled out any time an athlete, spectator, or volunteer is injured and major medical treatment is necessary, i.e. EMS is called, transport to the hospital or other treatment facility is required, etc.

Medical personnel will keep a log of all treatments throughout the weekend and will provide a copy to SOGA prior to leaving the Games facility.

In the event of a major incident, the Director of Business Administration should be notified as soon as possible after treatment is received.

PARTICIPANT ACCIDENT

(CONTINUED)

Covered Event is defined as any scheduled activity authorized, organized, and supervised by Special Olympics. With respect to competition activities, this includes pre-competition activities and practice sessions.

Covered Event also includes activities authorized by Special Olympics that are Directly Supervised by Registered Class A Volunteers, but only when participation is part of the Special Olympics athlete's overall sports training for Special Olympics, or for the purposes of qualifying for Special Olympics competition.

Directly Supervised is defined as supervised in person by a Registered Class A Volunteer.

Registered Class A Volunteer is defined as an individual currently registered in accordance with the Official Special Olympics General Rules (July 1997 edition, and as amended from time to time) or other Special Olympics policies in effect during the policy period.

Covered Travel is defined as travel that is traveling to, during, or after such activities as a member of a group in transportation furnished or arranged by Special Olympics.

Insured Persons are defined as United States Special Olympics athletes, unified partners, managers, coaches, officials, chaperones, supervisors, fundraising participants, and other volunteers, whose names are on file with Special Olympics, while participating in a Covered Event.

PARTICIPANT ACCIDENT COVERAGE & LIMITS:

- Excess Accident Medical/Dental Limit*	\$5,000
- Accidental Death Limit	\$5,000
- Dismemberment:	
- Both hands or feet	\$5,000
- Both eyes	\$5,000
- Speech and hearing (both ears)	\$5,000
- One hand or one foot or speech or hearing	\$2,500
- Thumb and index finger of the same hand	\$1,250

Only one of the amounts above (the largest applicable) will be paid.

* Dental includes sound and natural teeth and repair and replacement of existing artificial dental work.

NOTE: Please see the policy wording for a listing of all coverage exclusions.

VOLUNTEER MEDICAL MALPRACTICE

Description of Coverage: This policy provides insurance coverage for medical malpractice claims for medical services rendered at Special Olympics events by state-registered medical/health professionals who are registered Special Olympics volunteers, other than doctors, acting in the capacity of a Special Olympics Registered Volunteer. Coverage is not provided for doctors. Commercial medical service firms volunteering the services of their paid employees are not covered. However, should any of these employees volunteer their services on a personal basis, separate from their employment status, coverage would be extended provided such person is not a doctor and is a Special Olympics Registered Volunteer in accordance with the Official Special Olympics General Rules or other Special Olympics policies in effect during the policy period.

VOLUNTEER MEDICAL MALPRACTICE

(CONTINUED)

Insurer: Evanston Insurance Company

Named Insured: Special Olympics, Inc.

Policy Number: SM862262

MEDICAL MALPRACTICE COVERAGE & LIMITS:

- Each Claim	\$1,000,000
- Aggregate	\$3,000,000
- Deductible - each claim	\$2,500

NOTE: Medical Malpractice coverage for Healthy Athletes physicians is provided under a separate policy, which is paid for by SOI. Please contact American Specialty for further information.

CRIME

Description of Coverage: This policy provides insurance coverage to Special Olympics, Inc. and Special Olympics Accredited U.S. Programs against fraudulent, dishonest, or criminal acts committed by a Special Olympics employee, volunteer, or board member acting alone or in collaboration with others and causing Special Olympics to suffer a loss of money, securities, or property.

This policy provides world-wide coverage.

This policy also includes coverage for losses sustained by an ERISA plan.

Insurer: Chubb Insurance Company

Policy Number: 8153-0765

CRIME COVERAGE & LIMITS:

- Employee Dishonesty policy limit	\$500,000
- Deductible (per occurrence)	\$100,000

DIRECTORS & OFFICERS LIABILITY

Description of Coverage: Each U.S. Program and SOI has bound D&O coverage through Philadelphia Indemnity Insurance Company. The D&O policy provides protection against liability caused by the wrongful acts of directors, officers, trustees, employees, and volunteers of Special Olympics, including employment-related practices. The policy does not cover bodily injury losses or breach of contract. Directors, officers, trustees, employees, volunteers, or the entity itself must be named in a lawsuit in order for coverage to respond. The limits, retention, and premium that apply to each U.S. Program will vary, depending on whether or not the Program has sustained losses in the past or its desired limit of liability. The minimum limit is \$1,000,000 per claim/annual aggregate.

If you are interested in increasing your limit of liability, please contact Jina Doyle.

AMERICAN SPECIALTY CONTACT INFORMATION

RISK MANAGEMENT/INSURANCE QUESTIONS:

Jina Doyle, Vice President, Special Programs

Phone: 800-245-2744, ext. 127

Fax: 260-672-8835

Email: jdoyle@amerspec.com

CERTIFICATE/COVERAGE/CONTRACT QUESTION

Rene Waterson, Vice President, Policy Services

Phone: 800-245-2744, ext. 135

Fax: 260-672-8835

Email: rwaterson@amerspec.com

CLAIMS QUESTIONS:

GENERAL LIABILITY AND AUTOMOBILE:

Cathy Schell, Vice President

Phone: 800-566-7941, ext. 245

Fax: 260-672-8835

Email: cschell@amerspec.com

PARTICIPANT ACCIDENT:

Cindi Arnold, Assistant Vice President

Phone: 800-566-7941, ext. 122

Fax: 260-672-8835

Email: carnold@amerspec.com

MAIL OR FAX CLAIMS TO:



AMERICAN SPECIALTY*

AMERICAN SPECIALTY INSURANCE & RISK SERVICES, INC.

P.O. Box 459

ROANOKE, IN 46783-0459

FAX: 260-672-8835

800-245-2744

WWW-AMERSPEC.COM

American Specialty Insurance & Risk Services, Inc. also conducts business as A.S.I.R.S.I. Insurance Agency in the state of California, American Specialty Insurance & Risk Services Agency in the state of Michigan, and A.S. Insurance & Risk Services Agency in the state of New York.



Special Olympics
Georgia

SECTION H RULES AND COMPETITION

GAMES RULES

- Establish Games Rules Committee for total Games, or sports venue, in accordance with (N6B) guidelines.
- Games Rules Committee should ensure that all Sports Rules Committees are in place.
- Follow SOI guidelines for establishing Committee.
- Have appeal procedure in place and forms available.
- Make quick and rational decisions when necessary.

SPORT SPECIFIC RULES

General Rules that pertain to ALL competitions sanctioned by Special Olympics:

- No coach shall be allowed on playing field, court, lanes, rink, etc. during competition except for sports having modifications set forth by Special Olympics Georgia. (Example: Softball Team, Soccer Team, and Basketball Team competitions)
- Assistance shall be provided by a volunteer that is working any particular venue.
- Proper uniform clothing / safety equipment shall be worn for ALL competitions. Refer to Sports Rules Book for guidelines.
- No agency shall have an athlete or partner competing in Special Olympics that competes for a middle or high school team in the same sport, during the same season.
- All coaches shall follow the Code of Conduct displayed at www.specialolympics.org or will be dismissed from coaching responsibilities.
- All coaches must dress appropriately on the playing field, court, etc. (Example: Softball Competition – Coaches should wear like uniforms or khaki shorts and team shirt with athletic socks and shoes / cleats.)
- Coaches should represent his / her team in a professional, positive, and encouraging manner.

Aquatics

- Health and Safety is first and foremost with our athletes.
- NO products for incontinence will be allowed for competition.

Athletics

- Athletes shall wear athletic shorts or warm up pants, t-shirts, socks, and athletic shoes for competition.
- No jeans shall be allowed for competition.

Badminton

- Athletes shall wear athletic shorts or warm up pants, t-shirts, socks, and athletic shoes for competition.
- No jeans shall be allowed for competition.

Basketball

- Athletes shall wear matching basketball uniforms with numbers (front and back), socks, and athletic shoes for competition.
- No jeans shall be allowed for competition.
- Athletes shall wear NO jewelry.
- Basketball skills – matching uniforms, socks, and athletic shoes for competition. No numbers are required on uniforms.

Bocce

- Athletes shall wear like uniforms: shorts or warm up pants, like shirts, socks, and athletic shoes for competition.
- No jeans shall be allowed for competition.

Bowling

- Athletes shall wear khaki or colored slacks / shorts with like shirts (polo or nice tee).
- No jeans or cut off shorts shall be allowed for competition.

Cycling

- Bicycle helmets are required.
- Athletes shall wear bicycle shorts or shorts (warm up pants if cold) for competition.
- No jeans allowed for competition.

Equestrian

- Equestrian wear as stated in the Sports Rules Book is required.

Floor Hockey

- Athletes shall wear matching uniforms with numbers, socks, and athletic shoes for competition.
- No jeans shall be allowed for competition.
- Athletes shall wear NO jewelry.
- Floor Hockey skills – matching uniforms, socks, and athletic shoes for competition. No numbers are required on uniforms.

Golf

- Athletes shall wear khaki or colored slacks / shorts with polo or nice agency t-shirt.
- No jeans or sweat pants allowed for competition.

Gymnastics

- Proper competition wear is required.

Ice Skating (FIGURE & SPEED)

- Proper competition wear is required.
- Helmet for speed skating.

Long Distance Running / Walking

- Athletes shall wear athletic shorts or warm up pants, t-shirts, socks, and athletic shoes for competition.
- No jeans shall be allowed for competition.

Powerlifting

- A proper lifting suit is required.
- For specifications of undershirts, undershorts, footgear, belt, wraps, and general, see the Sports

Rules Book.

Rollerskating (Speed events)

- Athletes shall wear shorts / sweat pants and matching short sleeved shirts or one piece short sleeved outfits.
- No jeans allowed for competition.
- Helmets and wrist guards are required.
- Kneepads are optional but strongly recommended.
- For Artistic Rollerskating, refer to Sports Rules Book for proper uniforms.

Soccer

- Athletes shall wear matching uniforms with numbers (front and back), socks, and athletic shoes for competition.
- Soccer cleats are allowed. NO metal cleats allowed.
- No jeans shall be allowed for competition.
- Athletes shall wear NO jewelry.

Softball

- Athletes shall wear matching uniforms with numbers, socks, and athletic shoes or softball cleats for competition.
- NO metal cleats allowed.
- No jeans shall be allowed for competition.
- Athletes shall wear NO jewelry.
- Catchers are required to wear facemask, batter's helmet w/earflaps or catcher's helmet, chest protector, leg protectors.
- All batters and base runners are required to wear a batter's helmet. (Chin straps are not required but recommended)
- NO coaches will be allowed on the field of play except for the 1st base and 3rd base coach.
- The designated pitching coach in the Modified Team Play Division will pitch only – no coaching allowed from this position while on the field of play.

Table Tennis

- Athletes shall wear like uniforms: shorts or warm up pants, like shirts, socks, and athletic shoes for competition.
- No jeans shall be allowed for competition.

Tennis

- Athletes shall wear like uniforms: shorts or, like shirts, socks, and athletic shoes for competition.
- No jeans shall be allowed for competition.

Volleyball

- Athletes shall wear matching volleyball uniforms with numbers (front and back), socks, and athletic shoes for competition.
- No jeans shall be allowed for competition.
- Athletes shall wear NO jewelry.

VENUE CHECKLIST

Facility		Comments
Determine facilities needs		
Locate Possible facility sites		
Get contract for site		
Get contract for site		
Determine a charge for facility or personnel		

Determine rain site with and requirements Send facility a venue layout

Locate facility sites		
Visit site/select		
Get contract on site		
Get contact names		
Charge for facility?		

Design Facility Layout		
Include request for equipment usage		
Include request for personal usage		

Check to see if facility needs insurance

Send Confirmation letter, times, usage, etc		
Send Confirmation letter, times, usage, etc		

Determine Signage Usage

Inventory Signs		
Show placement on Venue Layout		
Order Signs if possible		

Determine Sound System Requirements

Use facility system available		
extension cords		
Electric Capability		

Determine Equipment Needs

Tents, tables, chairs, decorations		
Set and take Down Schedule for volunteers		

Volunteers Assignments

Determine needs per day per shift		
Give request to volunteer coordinator		
Job titles, numbers of each, and job descriptions		
Provide volunteer sign-in area		

Secure Officials

Certified Officials		
Volunteer or Paid		
Send Confirmation Letter to each official		
Have Training before event if necessary		

Volunteer check in at each facility

Volunteer sign in at each facility		
Have Job descriptions		
Hand out bibs and ask to return them upon checkout		
Get correct addresses for thank you notes		

Awards Communications

Backdrops & spare, fanfare tapes, stands		
Number of each kind of awards for athletes		
Flowers		
Determine placement of awards stands		
Include a venue layout		
Determine awards schedule		

Staging area must be separate from awards		
Rope off, have chairs, put P.A. system in place		
Have set announcer and script		
Special presenters/VIPs if possible		

Determine schedule		
Determine divisioning schedule		
Update info in coaches handbook		
Confirm officials		
Make sure SOGA has names of Sports rules are on site		
Look over all entries		
Double check field of play for safety		
Post results if possible		
Keep Nerve Center updated and communications team on competition		

COMPETITION GUIDELINES (LOCAL, AREA, REGIONAL)

SPECIAL OLYMPICS GEORGIA EVALUATION

AREA EVENT: _____ **DATE:** _____

AREA / LOCAL DIRECTOR: _____

LOCATION: _____ **FACILITY:** _____

Number of athletes: _____

SPORTS OBSERVED: _____

Evaluator: _____ **COMMENTS:**

Please write your comments/impressions on each aspect listed below:

Overall Facility:

- Facility open and available _____
- Adequate seating and spectator area __ __
- Parking was adequate __ __
- Sound system was available and was used __ __
- Tents/ Shading were available _ ____
- Restrooms were available _____
- Concessions were available

Registration:

- Pre-games forms were used __ __
- Pre-games timelines for forms was adequate __ __
- Athlete Rosters were available _____
- Heat sheets available as needed _____

Opening Ceremonies:

- Banners were visible _____
- Volunteers, agencies, etc. were recognized __ __
- Sound system was used adequately __
- Announcer was very enthusiastic _____
- Ceremony started on time and flowed smoothly _____
- Parade of Athletes and agencies announced _ ____
- Athlete Oath used _ ____
- Flag presentation and National Anthem _ ____
- Athletes part of opening ceremonies _____

Competition:

- Signage visible at event locations _____
- Rules Committee __ __
- Appropriate sports facilities were used __ __
- Event directors were easily identified / Local Coordinators ran events __ __
- Official SOI / SOGA events offered _____
- Divisioning completed prior to event __ __
- Heats grouped by gender age & ability with fair chance to win __ __
- Adequate number Timers/Score keepers _____
- Ability of Officials
- Other:

Medical:

- Trained medical personnel available and visible _ _____
- Medical Release forms on site _____
- Phone / Radio access for emergencies __ ____

Communications:

- 2-way radios _____
- Mobile phones __ ____
- Venue Announcements (P.A System) __ ____
- Nerve Center set up __ ____

Awards:

- Awards organized and available at all stations _ _____
- Ceremonial Presentation __ ____
- Award stands used and decorated __ ____
- P. A. System & music used __ ____
- Adequate Spectator/Family viewing area _ _____

Hospitality:

- Family Registration & Reception area _____

Volunteers:

- Adequate & Easily Identified _____
- Trained to perform assignment __ ____

Public Relations:

- Television/ Print / Radio coverage _____
- Press Releases/Media Alerts sent out _____
- Post Games Articles written __ ____

Summary:

SPECIAL OLYMPICS DIVISIONS WITHIN REGULAR COMPETITIONS

Continuing opportunities are being offered for Special Olympics athletes to compete in ability appropriate divisions within regular sports competitions. What a great opportunity for the athletes to achieve their individual goals. Listed below are some important factors to remember when hosting regular competitions or entering athletes into regular competitions.

Competitions that offer a division for athletes that participate in Special Olympics are not necessarily sanctioned by Special Olympics. If Special Olympics athletes participate in a NON-sanctioned competition, Special Olympics is not liable or accountable for any incidents that may occur while the athlete is training for or competing in the competition.

If the competition is sanctioned by Special Olympics, all rules, regulations, and guidelines for Special Olympics competitions must be followed. Before entering a Special Olympics athlete into a division within a regular competition, please know whether or not the competition is a Special Olympics sanctioned competition, especially if the title of the division represents Special Olympics in any way.

Before hosting a regular competition and offering a division representing Special Olympics in any way, please contact Sr. Coach Education and Program Manager for Special Olympics Georgia, for the proper procedures, rules, regulations, and guidelines.

770-414-9390 ext. 122

SUCCESSFUL DIVISIONING

DIVISIONING PROCESS

STEP BY STEP PROCESS:

- Divide Athletes/Teams by AGE
- Divide Athletes/Teams by SEX
- Divide Athletes/Teams by ABILITY

AWARDS – CORRECT USE

AWARDS INSTRUCTIONS

Must arrange to have tables and chairs set up at Awards area:

If awards stands and backdrops are available, those will need to be set up prior to competition.

Awards Equipment needed:

Tablecloths, Flowers, American Flags, Award Trays, Medals/Ribbons, Fanfare Music, Sound System for announcing event, Chairs for staging area

Set up for awards:

1. Place tablecloth on tables
2. Arrange medal and ribbons on table according to gold, silver, bronze, etc.
3. Make sure fanfare music and sound system are working.
4. Arrange your staging area for athletes receiving medals.
5. Heat sheets must be giving back to venue director to save results

Volunteer Assignments for awards:

Stage Placers-These are people who need to line up the athletes according to number on the stand.

Stand Escorts-These are people who take the athletes from the stage placers and stage the athletes on the stands for the awards presentation and then upon completion of awards presentation they help athletes down from the award stands

Announcer

Tray Holder -Person stands next to Celebrity giving out the awards

Celebrity places medal over the athlete

Fanfare Operator-Plays Fanfare music

AWARDS GENERAL RULES

Some programs have questioned the rules concerning awards at State Games. The following statement has been taken from the Special Olympics General Rules, Article 7, Section 7.07.

"Awards shall be distributed during Games and Tournaments only in accordance with these General Rules and the SOI Sports Rules. At all U.S. Program Games, National Games, Regional Games, World Games and any other Games or events sanctioned by SOI, medals shall be presented to the first, second, and third-place winners in each event, and ribbons shall be presented to athletes who finish in fourth through eighth place. Athletes who are disqualified (for reasons other than unsportsmanlike conduct or violations of the divisioning requirements of the SOI Sports Rules) or who do not finish an event shall be presented with a participation ribbon." Coaches play a unique and indispensable role in Special Olympics around the world. Coaches provide the sports skills and spirit that define a true athlete. In addition, coaches are role models and character builders. Coaches give Special Olympics athletes the most immediate awareness of their own worth, ability, courage and capacity to grow and improve. Coaches should define winning as "doing your personal best". If an athlete is well coached, no medal or ribbon will determine the worth of the athlete.

Awards Captain(s)

For each event, there is a designated Awards Captain who greets the volunteers that will help with the presentation of Awards. Their duties include:

- Coordinate with Competition Event Director the awards presentation time, flow of athletes, and the handling of heat sheets prior to game day.
- Set up Awards area the day of the event (tablecloth, medals, ribbons, flags, flowers)
- Assign and train volunteers to their specified role (Receivers, Stagers, Announcer, Presenter, and Tray Bearer).
- Perform a mock walkthrough of Award Presentations with volunteers prior to presentation time.
- Provide a Boom Box for fanfare music
- Take down area at end of the day
- Resolve Award issues with Competition Games Director and/or Awards Coordinator

Awards Captain Instructions

Items below will be set up prior to your arrival:

- ⑩ Tables and Chairs
- ⑩ Awards Stands (if appropriate)
- ⑩ Backdrops (if designated)

Items below will be made available to you:

- ⑩ Tablecloths
- ⑩ Flowers
- ⑩ American Flags/Georgia Flags
- ⑩ Awards Trays
- ⑩ Medals/Ribbons

- ⑩ Fanfare Music
- ⑩ Sound System

You need to bring:

Sandwich or drinks if you are staying the full day

Set Up Awards Area:

- ⑩ Place tablecloths on tables
- ⑩ Place medals/ribbons on table; arrange according to gold, silver, and so on
- ⑩ Check out fanfare music in your boom box
- ⑩ Check PA System and make sure it is working and that there are extra batteries
- ⑩ Arrange staging area for athletes about to receive medals
- ⑩ Save heat sheets to be delivered to venue directors at the end of your event
- ⑩ In the event of insufficient medals contact the Awards Coordinator(s) as soon as possible

Volunteer Assignments:

- ⑩ Stage Placers: These are people who need to line up the athletes according to the number on the stand (6,4,2,1,3,5)
- ⑩ Stand Escorts: These are the people who take the athletes from the stage placers and stage the athletes on the stands for the awards presentation and then upon completion of awards presentations they help athletes down from the awards stands.
- ⑩ Announcer: This is the person that will announce the sponsors, the events, and the placements of the athletes. Please make sure to be very energetic and upbeat throughout the entire ceremony!
- ⑩ Tray Holder: The person that stands next to the sponsor presenter with the medals and ribbons correctly placed on the tray.
- ⑩ Sponsor/Celebrity Presenter: Places medals over the athletes' heads, or pins the ribbons on the athletes. Shakes their hand, or gives them a hug.
- ⑩ Fanfare Operator: Plays fanfare music after all the awards for that heat have been distributed.

Sequence of Events:

- ⑩ Stage placers receive heat sheets from competition
- ⑩ Stage athletes(line up in chairs, or staging area)
- ⑩ Heat sheet goes to announcer
- ⑩ Celebrity/Sponsor stand in front of athletes
- ⑩ Announcer introduces celebrity/sponsor presenter if there is one
- ⑩ Announcer announces event, thenin 6th place _____, etc. Celebrity/sponsor places medal over the athlete or pins the ribbon on and then cheers, in 5th place _____, etc. Repeat above steps until all positions are announced.
- ⑩ Play fanfare music
- ⑩ Take athletes off the stage safely, and make sure they get back to the designated area for their coaches to pick them up.

At the end of your event, contact the Awards Coordinator(s) and let them know that your equipment and medals may be picked up.

AWARDS DIRECTOR

The Awards Director coordinates with the Sports Managers, Venue Director, and Volunteer Director in producing the awards ceremonies. The Sports Managers will provide competition schedules and awards schedules. The venue directors will be responsible for setting up the awards area and staging area. The Volunteer Coordinator will recruit the necessary volunteers to cover all the necessary positions requested by the Awards Director.

There will be one Awards Captain for each sport venue. The awards director is in charge of recruiting these

individuals. The director will work with the volunteers to train them and place them into their positions. The Awards Director is responsible for securing the necessary flowers and decorations for the awards areas as well as training key volunteers in their roles. The Awards Captains must attend a pre games training session on presentation of Special Olympics awards. Everyone must work together to make sure all the necessary positions are filled and volunteers are trained to ensure a proper awards ceremony.

OFFICIAL AWARDS PRESENTATION SCRIPT

Introduction of celebrity/sponsor/VIP presenter of Awards:

Ladies and gentlemen, it is my pleasure to introduce (presenter name and affiliation) who will be presenting Awards to our athletes for (presentation time period)
Occasionally, re-introduce celebrity/sponsor/VIP presenter

MEDAL PRESENTATION SCRIPT

Ladies and gentlemen, it is my pleasure to announce the results of the (Event, Division, Heat... from Heat Sheet)

In 6th place with a time/score of (time/score) is (name of athlete/team) ...pause for presentation

In 5th place with a time/score of (time/score) is (name of athlete/team)... pause for presentation

.... Repeat to 1st place.....

Fanfare music is played..... athletes are cheered!!!!!!

VOLUNTEERS WILL BE ASSIGNED THE FOLLOWING ROLES

Receivers: Position the athletes in a line or in seats, depending on the event, according to the competition placements (6, 4, 2, 1, 3, 5). This positioning aligns with the position of the Award Stands.

Stagers: Walk the athletes to the award stands making sure no one stumbles or falls while stepping onto and off the stands.

Announcer: Announce to the spectators the event, the position that is being awarded, i.e...."In third place...", and the name of the athlete. Announcer also plays the 3-5 second Fanfare tape.

Presenter: Places the medals or ribbons around the athlete.

Tray Bearers: Hold the tray next to Presenter upon which the medals and ribbons are placed.

"FANS IN THE STANDS" AKA "CHEERLEADERS"



DEFINITION --"Fans in the Stands" is a Special Olympics Georgia term for Cheerleaders.

WHO ARE "FANS IN THE STANDS"? – **1)** These are volunteers that come to Special Olympics events to cheer for athletes participating in the sports offered. **2)** These volunteers can be other athletes that are not participating in the games. **3)** These volunteers can be dressed in like uniforms, on the sidelines of games, cheering for the preferred team. **4)** "Fans in the Stands" participants are not to be included on Games Paperwork "Head of Delegation & Housing Form" that is sent into the State Office. If an agency wishes to bring "Fans in the Stands" to games, and requests housing and meals for the participants, the agency is responsible for incurring the additional costs. (Please include the needed numbers and proper payment on the "Registration Fees" sheet).

VOLUNTEER VS. ATHLETE? – If an athlete comes to games to be a part of a "Fans in the Stands" group, he or she must sign in at the Day Only Volunteer Registration Table. The athlete is not considered an athlete participant in those games. Therefore, he or she must be considered a volunteer participant at the games, not an athlete.

WHY NOT "CHEERLEADERS"? – Cheerleading is not sanctioned as a sport by Special Olympics Incorporated. Therefore, Special Olympics Georgia does not recognize Cheerleading as a sport.

****NOTE:** Athletes that participate as "Fans in the Stands" will not receive Special Olympics ribbons or medals at the games or participate in the awards ceremony. Any agency that brings "Fans in the Stands" to games is responsible for rewarding the volunteer participants if so desired, in a location other than the Special Olympics awards area.

OPENING CEREMONY POLICY

Amendment One:

- 1.1 The Law Enforcement Torch Run (LETR) began in 1981 when Wichita, Kansas Police Chief Richard LaMunyon saw an urgent need to raise funds for and increase awareness of Special Olympics. The Torch Run was quickly adopted by the International Association of Chiefs of Police, now recognized as the founding law enforcement organization of the Law Enforcement Torch Run for Special Olympics and is the largest grassroots event for Special Olympics – raising funds and awareness for the movement all over the world. It has expanded into all 50 states and 35 countries. In 2003 this international initiative raised more than US \$20 million for Special Olympics.
- 1.2 In 1987, the Torch Run began in Georgia by Law Enforcement Officers who had heard about the movement and wanted to bring it to Georgia. Since its beginning in Georgia, the LETR has raised millions for Special Olympics Georgia. Officers from all over the state run over 1,100 miles over nine routes each year, culminating at the Opening Ceremony of the State Summer Games. LETR is an integral part of Special Olympics Georgia, raising funds that assist in paying for the state games, and

- the officers are the guardians of the 'Flame of Hope'.
- 1.3 The purpose of this amendment is to outline the procedure for the Torch Run at the SOGA State Games Opening Ceremony as set forth by the LETR Executive Council. Representatives from the Top Five money raising departments will participate in the Final Leg of the Torch Run into the Opening Ceremony of each state games. Additionally, the Torch Run Director and the LETR Executive Council will choose the athletes that accompany the officers during the final leg of the Opening Ceremony of each of the State Games.
 - 1.4 Athletes must be registered with SOGA and participating in the current State Games. Each participating Law Enforcement Agency (participating departments are defined as those that have raised at least \$1 during the current calendar year for each of the state games after March 1 and those that have raised at least \$1 in the previous calendar year for the state games preceding March 1) will submit one nomination of an athlete to the Torch Run Director at least 45 days prior to the State Games. The Executive Council will meet and choose six athletes (five to run and one alternate) and will provide the names of the athletes to the SOGA staff liaison to the Opening Ceremony at least 30 days prior to the Opening Ceremony. A record will be kept of the participating athletes so that no duplication will occur. The SOGA staff liaison will confirm that the athletes are registered and then the Director of Program Services will contact those athletes and their coaches to make arrangements for their participation in the Opening Ceremony.
 - 1.5 One officer from each of the Top Five Fundraising Departments will run a leg of the Torch Run during the Opening Ceremony for most of the State Games. The Top Five will be determined from the funds turned in as of the end of the LETR year (usually July 15). Those Top Five will run the Torch in Opening Ceremony for a complete year.



Special Olympics
Georgia

COMPETITION SANCTIONING FORM

Special Olympics Incorporated (SOI) requires that all Competitions be sanctioned. In order to hold an *Official* Special Olympics competition, you must submit this form to the Special Olympics Georgia State Office with your Accreditation packet in January. Notify the SOGA Office of any changes in date / location of event. **ALL information must be completed for approval.**

AREA / LOCAL PROGRAM: _____

NAME OF COMPETITION: _____

(Example: Rockdale County Summer Games, Area 6 Softball Tournament, etc.)

COMPETITION SITE & CITY: _____

COMPETITION DIRECTOR'S NAME: _____

PHONE #: (_____) _____ FAX # (_____) _____

E-MAIL ADDRESS: _____

COMPETITION DATE: _____ RAIN DATE: _____

What Official Special Olympics sports will be offered?

1. _____
2. _____
3. _____
4. _____

List any other events / activities that will be offered:

Will a Special Olympics Georgia approved torch be used during this event?

Name the volunteer responsible for the use of the said torch:

I verify all information given is accurate and true for the competition:

Local Coordinator: _____ Date: _____

Regional Manager: _____ Date: _____

SOGA OFFICE USE ONLY:

RETURN FORM TO:

DATE RECEIVED: _____

APPROVED: _____

DENIED: _____

REASON: _____

Sr. Coach Education & Program Mgr.

Special Olympics Georgia

4000 Dekalb Technology Pkway

Suite 400, Building 400

Atlanta, GA 30340

Fax #: 770-216-8339

SR. COACH EDUCATION AND PROGRAM MANAGER SIGNATURE:



SECTION I UNIFIED SPORTS

GENERAL UNIFIED INFORMATION

Special Olympics Unified Sports® is an initiative that combines approximately equal numbers of Special Olympics athletes and athletes without intellectual disabilities (called Partners) on sports teams for training and competition. Age and ability matching of athletes and Partners is defined on a sport-by-sport basis.

Throughout the year, in a variety of sports ranging from basketball to golf to figure skating, Unified Sports athletes improve their physical fitness, sharpen their skills, challenge the competition and have fun, too.

The concept of combining athletes with intellectual disabilities and those without was first introduced in the mid-1980s to provide another level of challenge for higher ability athletes and to promote equality and inclusion. Today, the initiative includes virtually all Special Olympics sports, and Unified Sports competitions are an important part of Special Olympics World Games, as well as local, state/provincial and National Games.

Unified Sports enables Special Olympics athletes to:

- ⑩ learn new sports
- ⑩ develop higher-level sports skills
- ⑩ have new competition experiences
- ⑩ experience meaningful inclusion (each athlete is ensured of playing a valued role on the team)
- ⑩ socialize with peers and form friendships (the initiative provides a forum for positive social interaction between teammates and often leads to long-lasting friendships), and
- ⑩ participate in their communities and have choices outside of Special Olympics. Unified Sports programs often are initiated by community partners, including parks and recreation departments, schools, Boys and Girls Clubs of America and community sports organizations. These partnerships help further include athletes in their community.

UNIFIED PARTNER TRAINING



UNIFIED PARTNER TRAINING UNIFIED COACH TRAINING

- ⑩ Special Olympics Incorporated and Special Olympics Georgia requires that all Unified Sports Teams be coached by a coach that is certified in Unified Sports.
- ⑩ Special Olympics Incorporated and Special Olympics Georgia require that all Head Coaches sign a Unified Sports Team Participation Agreement before participating in a competition.
- ⑩ Special Olympics Georgia is implementing a process for all Unified Partners and Coaches to receive Unified Sports Training in order to participate on or coach a Unified Team.

Special Olympics Georgia recognizes the amount of growth in the Unified Sports Program and a growing need for the Unified Coaches and Unified Partners to receive training in Unified Sports.

UNIFIED SPORTS PARTNER APPLICATION

UNIFIED SPORTS PARTNER
APPLICATION FOR PARTICIPATION IN SPECIAL OLYMPICS

Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement

Area _____

Agency _____

PARTNER INFORMATION

Partner Name _____	Sex/Gender	Date of
Birth (month/day/year) _____		
Address _____	M F	
City & Zip _____	Home Phone (____)	
Parent/Guardian Name _____	Home Phone	
(____) _____		
Address (if different from Partner) _____	Work Phone	
(____) _____		
Emergency Contact (if other than parent/guardian) _____	Home Phone	
(____) _____		
Health/Accident Insurance Company _____	Policy	
# _____		

SPECIAL OLYMPICS RELEASE AND WAIVER OF LIABILITY

In consideration of participating in Special Olympics Unified Sports, I represent that I understand the nature of the event and that I (or my child if a minor) am (is) qualified, in good health, and in proper physical condition to participate in Unified Sports events. I fully understand the event involves risks of serious bodily injury which may be caused by my own actions or inactions, by the actions of others participating in the event, or by conditions in which the event takes place. I fully accept and assume all such risks and all responsibility for losses, costs, and/or damages I (and/or my minor child) may incur as a result of my (or my child's if a minor) participation. I acknowledge that at any time that if I (we) feel that the event conditions are unsafe, I, (and/or my minor child) will discontinue participation immediately.

If during my participation in Special Olympics activities I should need emergency medical

treatment and I (or my child if a minor) am (is) not able to give my consent for or make my own arrangements for that treatment because of my injuries, I authorize Special Olympics to take whatever measures are necessary to protect my health and well-being, including, if necessary, hospitalization.

I(or my child if a minor) release, indemnify, covenant not to sue, and hold harmless Special Olympics, its administrators, directors, agents, officers, volunteers, employees, other Unified Sports participants, sponsors, advertisers and if applicable, any owners and lessors of premises on which the activity takes place from all liability, any losses, claims (other than that of the medical accident benefit), demands, costs, or damages that I (or my child if a minor) may incur as a result of participation in Unified Sports events and further agree that if, despite this Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement, I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any litigation expenses, attorney fees, loss, liability, damage or cost which may incur as a result of such claim.

- 1) Do you use illegal drugs? Yes___ No___ 2) Have you ever been convicted of a criminal offense? Yes___ No___
3) Have you ever been charged with neglect, abuse or assault? Yes___ No___ 4) Has your driver's license ever been suspended or revoked in any state? Yes___ No___

List 2 non-family references:

Name Relationship Address or Phone Number

1) _____

2) _____

PLEASE READ BEFORE SIGNING – I understand that: -the information that I have provided may be verified, and I give permission to Special Olympics to make inquiry of others concerning my suitability to act as a Special Olympics volunteer; -in the course of volunteering for Special Olympics, I may be dealing with confidential information and I agree to keep said information in the strictest confidence; -the relationship between Special Olympics and volunteers is an at will arrangement, and it may be terminated at any time without cause by either the volunteer or Special Olympics; -I grant Special Olympics permission to use my likeness, voice, and words in television, radio, film, or in any form to promote activities of Special Olympics.

I have read this Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement and fully understand it.

Signature of Unified Sports Partner Date

Signature of Parent or Guardian if Unified Sports Partner is a minor Date



Special Olympics
Georgia

SECTION J STATE GAMES PAPERWORK/FORMS

SPECIAL OLYMPICS DIVISIONS WITHIN REGULAR COMPETITION

Continuing opportunities are being offered for Special Olympics Athletes to compete in ability appropriate divisions within regular sports competitions. What a great opportunity for the athletes to achieve their individual goals. Listed below are some important factors to remember when hosting regular competitions or entering athletes into regular competitions.

- Competitions that offer a division for athletes that participate in Special Olympics are not necessarily sanctioned by Special Olympics. If Special Olympics athletes participate in a NON-sanctioned competition, Special Olympics is not liable or accountable for any incidents that may occur while the athlete is training for or competing in the competition.
- Competitions that offer a division for athletes that participate in Special Olympics are not to title a special division any title representative of Special Olympics, unless the competition is sanctioned by Special Olympics. If the competition is sanctioned by Special Olympics, all rules, regulations, and guidelines for Special Olympics competitions must be followed.
- Before entering a Special Olympics athlete into a division within a regular competition, please know whether or not the competition is a Special Olympics sanctioned competition, especially if the title of the division represents Special Olympics in any way.
- Before hosting a regular competition and offering a division representing Special Olympics in any way, please contact the Sr. Sports Manager for Special Olympics Georgia, for the proper procedures, rules, regulations, and guidelines.

770-414-9390

STATE GAMES LATE PAPERWORK POLICY

- **All State Games Paperwork is due in the State Office no later than 5:00pm on the deadline date.**
- **Paperwork received in the State Office up to 3 days after the deadline will be accepted as follows:**
 - **For paperwork that is received after the deadline date or up to 3 days after the deadline date, the agency will be assessed a \$100 late fee.**
 - **After 3 days, NO GAMES PAPERWORK WILL BE ACCEPTED.**
 - **The \$100 late assessment fee is due in the State Office by the Problem Sheet deadline date for State Games.**
 - **Agencies failing to pay the \$100 late assessment fee by the Problem Sheet deadline date will be unable to attend the State Games.**

PLEASE MAKE EVERY EFFORT TO GET IN ALL PAPERWORK BY THE DEADLINE FOR ALL STATE GAMES.

***** PLEASE NOTE: THIS POLICY DOES NOT APPLY TO THE ELIGIBILITY DATE FOR MEDICAL FORMS AND PARTNER FORMS. THESE FORMS MUST BE TURNED IN BY THE ELIGIBILITY DEADLINE FOR ALL STATE GAMES. *****

REMEMBER: NO faxed paperwork will be accepted!!

What to do when a file is exported to you from SOGA

1. A .zip is sent to the agency electronically
2. Open GMS.
3. At the top click 'Tools', then select 'Import' followed by 'Using GMS Exchange'.
4. Next, select the .zip file from SOGA.
5. Now, check the top right box that reads 'Import all people even if not imported from a games'.
6. Also, check the box that reads 'If source permanent delegation exists in this data, update its name with the source name.'
7. Finally, click 'Import' at the bottom right portion of the screen.

PAPERWORK ON THE INTRANET

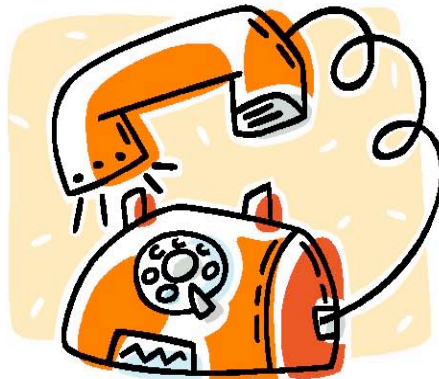
If you have email you can do it!!!!

The ID and password is "area" then your number with no spaces.

Example: area04

You fill out the paperwork, save it to your hard drive, then attach it to an email to the State Office
If you have any questions just let us know!!! [Call Policy – for Housing Check-In at State Games/Events](#)

CALL POLICY



On the Friday of Games, if you are running late for housing check-in you must call the Nerve Center by 5 pm, to let us know that you are still coming and with an approximate time of arrival and any scratches/substitutions you may have. SOGA will, then, put all of your room keys with your registration packet (credentials). You will be able to pick up that packet in the Nerve Center, upon your arrival.

If SOGA does not hear from you by 5 pm, we will assume you and your agency are not coming and will turn in all rooms reserved for your agency. At that point, it will be your responsibility to work out housing for your agency.

This policy will pertain to all State Games. Please refer to the appropriate Information Guide for correct hours of housing check-in and for the Nerve Center phone number.

PROBLEM SHEET TERMINOLOGY

1. **(Athlete Name) is** scratched from games. His/Her application for participation form expired on **(Expiration Date)**.
2. **(Athlete Name)** will be eligible for Games if you get a new application for participation form turned

--	--	--	--

I verify that all of the Coaches' names listed above have completed all required paperwork to attend Games. The listed Coaches have been through the required screening process and are eligible to attend Games.

Head of Delegation Signature

EVENT EVALUATION FORM

Name:

Event attended:

Role at Games (ex.: volunteer, spectator...etc):

Address:

Phone #

Email:

1. Have you attended a Special Olympics Georgia competition / event before?
2. If so, when was the last SOGA event you attended and how often?
3. Were events started on time?
4. Were Officials and Volunteers knowledgeable and well trained?
5. Were the events run professionally?
6. Was the atmosphere positive?
7. What were the top 2 highlights of the event?
8. Would you attend / participate again?
9. What would improve this event?
10. Would you like to become more involved with Special Olympics Georgia (SOGA)?

(770) 414-9389 – fax

SPECIAL OLYMPICS OUTREACH AWARDS PROGRAM

This form must accompany the Application for Participation Forms that you wish to be reviewed for the awards program:

Name: _____ Date: _____

Agency: _____

Address: _____

Day time phone number: _____

E-mail: _____

Social Security #: _____

Number of forms returned to SOGA: _____

Date they are placed in mail: _____

For SOGA Purposes only. Do not complete this section:

Number of forms: _____

Criteria met: Yes _____ No _____

Amount reimbursed: _____

Date reimbursed: _____

Check made payable to: _____

Please send all forms to the Atlanta office at:

**4000 Dekalb Technology Parkway
Suite 400, Building 400
Atlanta Georgia 30340**

If you have any questions, need new or additional Participation Forms, or are in need of a medical professional to sign the form, please contact your Regional Manager. Forms can be found and printed from the SOGA Intranet site.

SCORESHEETS

HEAT _____		
ATHLETE NAMES	SCORE	PLACE
1		
2		
3		
4		
5		
6		
7		
8		

HEAT _____		
ATHLETE NAMES	SCORE	PLACE
1		
2		
3		
4		
5		
6		
7		
8		

HEAT _____		
ATHLETE NAMES	SCORE	PLACE
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HEAT _____		
ATHLETE NAMES	SCORE	PLACE
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HEAT _____		
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HEAT _____		
ATHLETE NAMES	SCORE	PLACE
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3		
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6		
7		
8		

HEAT _____		
ATHLETE NAMES	SCORE	PLACE
1		
2		
3		
4		
5		
6		
7		
8		

Please be accurate in compiling the list—Thanks so much

AREA #:	AGENCY NAME:
LOCAL COORDINATOR:	FAX #:
ADDRESS:	
CITY: ZIP:	PHONE (DAY):
PHONE (MOBILE):	EMAIL:

TEAM SPORTS: The number of athletes & coaches allowed per team is indicated below.

TRADITIONAL TEAM BASKETBALL (10 Athletes, 3 Coaches per team) _____ **Junior** _____ **Senior**
_____ **Masters**

UNIFIED TEAM BASKETBALL (10 on roster = 5 Athletes & 5 Unified Partners, 3 Coaches per team) _____ **Junior** _____
Senior _____ **Masters**

TEAM SKILLS BASKETBALL (10 Athletes, 3 Coaches per team) _____ **Junior** _____ **Senior** _____
Masters

TEAM FLOOR HOCKEY (13 Athletes, 3 Coaches per team)) _____
Junior _____ **Senior** _____ **Masters**

UNIFIED TEAM FLOOR HOCKEY (13 on roster = 7 Athletes & 6 Unified Partners, 3 Coaches per team) _____ **Junior** _____ **Senior**
_____ **Masters**

TEAM BOWLING (4 Athletes, 1 Coach per team) _____ **Junior**
_____ **Senior**

UNIFIED TEAM BOWLING (4 on roster = 2 Athletes & 2 Unified Partners, 1 Coach per team) _____ **Junior** _____
Senior

]

INDIVIDUAL SPORTS: Coach to Athlete Ratio is 1 to 3. (Exceptions: In Level A, Ramp Bowling, & Scooter Board ... Ratio can be 1 coach to 1 athlete if needed)

BASKETBALL: _____ Skills _____ Level A Skills

BOWLING: _____ Singles _____ Ramp

ROLLER SKATING: _____ Speed _____ Artistic _____ Level A

Scooter Board

_____ **4 x 100 Relay** (Must be comprised of 4 Speed Skaters already entered)

ICE SKATING: _____ (Includes Speed, Figure, & Level A)

POWERLIFTING: _____

ARTISTIC GYMNASTICS: _____

FLOOR HOCKEY SKILLS: _____

_____ TOTAL # ATHLETES/ PARTNERS

_____ TOTAL # COACHES

_____ TOTAL

SPECIAL OLYMPICS GEORGIA WISH LIST FOR STATE SUMMER GAMES

FAX: 770 216 8339 Deadline: Attn: Sports Manager (Games) SOGA will mail Games updates to the person indicated below. Be sure the address is accurate.

AREA #:	AGENCY NAME:
LOCAL COORDINATOR'S NAME:	
ADDRESS:	
CITY: STATE: ZIP:	
PHONE (Day) : () _____ PHONE (Night) : () _____ FAX # : () _____ Email Address: CELL #:	

UNIFIED TEAM SOCCER -5-a-side (10 on Roster -5 Special Olympics athletes, 5 Unified Partners, 3 coaches) _____ Junior Senior / Masters

TRADITIONAL TEAM SOCCER -5-a-side (10 Special Olympics athletes, 3 coaches) _____ Junior Senior / Masters

TRADITIONAL TEAM VOLLEYBALL (10 Special Olympics athletes, 3 coaches) _____ Junior Senior Masters

UNIFIED TEAM VOLLEYBALL -(10 on Roster -5 Special Olympics athletes, 5 Unified Partners, 3 coaches) _____ Junior Senior Masters

MODIFIED TEAM VOLLEYBALL -(10 Special Olympics athletes, 3 coaches) _____ Junior Senior Masters

INDIVIDUAL SPORTS: Coach to athlete ratio is 1 to 3. (Level A /Wheelchair athlete to coach ratio is 1 to 1, if needed)

AQUATICS:	Level A AQUATICS:	BADMINTON:
ATHLETICS:	PENTATHLON:	Level A ATHLETICS:
Motorized Wheelchair ATHLETICS:	Wheelchair ATHLETICS:	
Female Rhythmic GYMNASTICS:	Male Rythmic GYMNASTICS:	Level A Rythmic GYMNASTICS:
SOCCER SKILLS:	TABLE TENNIS:	TENNIS:

* **Team Athletics Relay -4 X 100 meters** _____ Junior Senior _____ Masters

- You may select 4 of your Athletics athletes to compete in a relay as their 3rd event. You do NOT receive "extra" slots for this relay event.

# Athletes / Partners	
# Coaches	
Total	

SUBSTITUTIONS

- ⑩ Substitutions are not to be made for **individual sports** after the substitution/ problem sheet deadline.
- ⑩ All **team sports** substitutions must be made by, or at, the time of registration for state games.
- ⑩ NO substitutions are allowed after registration is over for state games.

GAMES REGISTRATION CHECKLIST

Completed paperwork packets are due to the SOGA Atlanta Office by TBA

Completed paperwork packets include:

- ⑩ **REGISTRATION FEES** with check attached (can't process forms until fees received) If you can't get the check by the deadline you must attached a copy of the request for the check.
- ⑩ **HEAD OF DELEGATION / ROSTER / HOUSING FORM** – All delegations submit this form whether Housed or Day Only. If Day only, fill in all of delegates names & check "Day Only" at top of form. If Day only please make sure that you list everyone coming.

HOUSING WORKSHEET

- ⑩ **VOLUNTEER PROFILE FORM FOR COACH / ASST. COACH / BUS DRIVER OR NURSE** attending games. If you already sent in a form you do not need to send in another one.
- ⑩ **REGISTRATION FORMS** for each team participating.
- ⑩ **VOLUNTEER/ COACH SCREENING CERTIFICATION FORM** – THIS FORM MUST LIST ALL VOLUNTEERS AND COACHES THAT ARE COMING TO GAMES.

I have enclosed all the forms checked above.

Signature of Head of Delegation



Head of Delegation & Roster Form

Head of Delegation: _____			
Mailing Address: _____			
City: _____	State: _____	Zip: _____	
Day Phone: () _____	Cell: () _____	To be used during Games Weekend	
Email: _____	Fax: () _____		

<input type="checkbox"/>	Our Agency does NOT need Housing Check this box if attending for DAY ONLY
--------------------------	--

Area #: _____
Agency: _____

Males -Name	Athlete	Partner	Coach	HOD	Wchair	Level A	Day Only	FEMALES -Name	Athlete	Partner
								1		
								2		
								3		
								4		
								5		
								6		
								7		
								8		
								9		
								10		
								11		
								12		
								13		
								14		

List each Athlete, Unified Partner, Coach and (HOD) Head of Delegation that is in your quota & check the correct box indicating their role at this competition. If an athlete in a wheelchair or Level A athlete needs special housing on the ground floor, place an "S" in the box labeled Wheelchair or Level A. If a wheelchair athlete or level A athlete does not require ground floor housing, place a check in the box labeled wheelchair or level A. Only those listed on this housing form will have sleeping space reserved for them.

NOTE: WE HOUSE 4 TO A ROOM IN DOUBLE ROOMS AND KING ROOMS WITH PULLOUT SOFAS.



SECTION K

OTHER SOUTHEAST EVENTS

SOUTHEAST COMPETITIONS

Each year Special Olympics Georgia athletes have an opportunity to compete in Special Olympics competitions within the Southeast Region. Below is a short description of each competition. Athletes from the Southeastern Region (Alabama, Georgia, Florida, Tennessee, Mississippi, South Carolina, Georgia, and North Carolina) come together for these exciting competitions.

Southeast Alpine Skiing – Boone, North Carolina

Athletes participate in Alpine Skiing or Snowboarding. Athletes of all levels of ability are encouraged to compete in this event.

Southeast Ice Skating – Huntsville, Alabama

Athletes participate in Speed Skating or Figure Skating. Athletes of all levels of ability are encouraged to compete in this event.

Southeast Tennis – Hilton Head, South Carolina

Athletes participate in Tennis Skills, Short Court Tennis Doubles, Tennis Singles and / or Doubles, and Unified Doubles. Athletes of all levels of ability are encouraged to compete in this event.

Southeast Sailing – Biloxi, Mississippi

Athletes participate in Unified Sailing events. Athletes of all levels of ability are encouraged to compete in this event.

Southeast Powerlifting – Georgia

Athletes participate in Deadlift, Bench Press, and Squat events, as well as, Unified events. Athletes of all levels of ability are encouraged to compete in this event.



Special Olympics
Georgia

SECTION L INVITATIONALS

HOW TO HOST AN INVITATIONAL IN YOUR AREA

BRING AN INVITATIONAL TO YOUR TOWN!!!

Special Olympics Georgia holds several invitationals yearly in various sports, which include Tennis, Soccer, Volleyball, Sailing, Bocce, Softball, and Basketball. This bid application is for ANY agency/city interested in hosting one of these or any other exciting events. SOGA requires all bidding agencies to give a two year commitment to host the selected invitational.

There are many benefits to hosting an invitational. They generate local revenue, provide an opportunity for more community involvement, and encourage family participation. Each agency is given a stipend to defray the cost of the invitational. The Host Agency is responsible for organizing the event from volunteers to divisioning, providing a lunch, and awards. The state office gets the message out to the state through emails and bulk mailings and sends out all the registration information needed prior to the event.

The dates of each invitational falls within the same season as the competition is implemented during state games. The following application must be submitted as well as a brief description of why you'd like to host an invitational in your town.

BID APPLICATION FOR INVITATIONAL

Bidding Agency: _____

Tournament Director: _____

Address: _____

Phone Day: _____ Email: _____

Sport Interested in Hosting: _____ Dates: _____

Proposed Venue/Site: _____

Fill Out Information As Needed

Seating Capacity: _____ # of Courts _____

Equipment Needs: _____

Court Surface: ___Hardwood ___Synthetic___Clay___Other

Are Fields Lighted? ___ Fence Distances: _____

Who maintains fields: _____

All Venues

Are There:

___Restrooms

___Phones

___Scoreboard

___Locker Rooms

___PA System

___Dugouts

___Press Box

___Concessions

___Drinking Fountain

___Available Staff

___Bus Parking

___Curb Cuts

RETURN TO:

Special Olympics Georgia
4000 Dekalb Technology Pkwy.
Building 400, Suite 400
Atlanta, GA 30340

Fax: 770-216-8339 Phone: 770-414-9390



Special Olympics
Georgia

SECTION M FAMILY ACTION NETWORK

ROLE OF FAN & WHO IT SERVES

SPECIAL OLYMPICS GEORGIA FAMILY ACTION NETWORK F.A.N.

Special Olympics Georgia is a year-round program of sports training and athletic competition for all children and adults with intellectual disabilities.

The Special Olympics Oath: Let me win. But if I cannot win, let me be brave in the attempt.

Family Action Network (FAN) is the organization of families of Special Olympics athletes. FAN supports athletes and their families in many different ways. FAN hosts family gatherings at state and local competitions, provides camp scholarships, and sponsors speakers for the family sessions at the annual SOGA Leadership Conference. FAN also sells souvenirs at many SOGA functions, and the profits are used to support FAN sponsored activities. In addition, FAN sponsors family camp for athletes and their families. Camps have been held in Savannah and Winder, GA. Scholarships are available through FAN for those needing assistance.

FAN meetings are held at family camp, at Winter Games, Summer Games and the Leadership Conference. Parents and families of Special Olympics athletes are welcome to join FAN. Officers must be parents or family members of SOGA athletes. Current officer positions include: Chairperson, Secretary, Treasurer, Souvenir Sales, Camp Director, and State Games Chairperson.

Members of FAN receive mailings and emails from SOGA, and are encouraged to support FAN by volunteering at family events such as hospitality sites and souvenir tables at SOGA competitions. Each SOGA area also has need of a family representative, and FAN members are encouraged to volunteer to fill those slots in their areas.

For more information about FAN contact SOGA liaison at (770) 414-9390

Family Mission

To provide year-round activities for all families of Special Olympics athletes. These activities give families the opportunity to share experiences and knowledge, and to form friendships with other Special Olympics families.

Family Goal

To create, promote, and support Special Olympics families by establishing a state-wide family network that will provide training, education, and outreach.

Family Action Network

The Network consists of local and area family management team representatives, State Games management team family representatives, a SOGA staff liaison, and the Family Action Network Committee Chairman, Secretary, Treasurer, Souvenir Coordinators, Camp Director, and Members at Large.

F.A.N. Supports You By:

1. Annually offering up to eighteen scholarships for Family Camp.
2. Providing financial support to pay for a portion of the expenses for Family Camp.
3. Providing family ribbons at all SOGA State Games and Leadership Conference.
4. Providing refreshments at the Family Hospitality Tent or family social at SOGA State Games.
5. Providing speaker stipends at the SOGA Leadership Conference for the Family Sessions (if deemed necessary).
6. Providing volunteers who coordinate the buying and selling of souvenirs at all SOGA State events.
7. Provide sponsor support of SOGA events (if deemed necessary)
8. Providing volunteers who give their time to organize and implement all of the above mentioned activities.

Family Involvement

Family camps, hospitality centers at State events, souvenir sales at State events, receptions/dinners at State events, quarterly meetings, SOGA Conference sessions, recognition ribbons, SOGA publications, "Family of the Year" award, and Grand Marshall at State Summer Games.

Benefits

Special Olympics Georgia contributes to the physical, social, and psychological development of people with intellectual disabilities. Through successful experiences in sports, the athletes gain confidence and build a positive self-image, which carries over into the classroom, the home, the job, and the community.

In addition, involvement with Special Olympics Georgia strengthens families, causing a richer appreciation of talents and greater support between the Special Olympics athlete, siblings, and parents. Also, the community at large, through observation and participation, is united in understanding people with intellectual disabilities in an environment of equality, respect, and acceptance.



Special Olympics
Georgia

SECTION N
DEVELOPMENT AND FUNDRAISING

ABC'S OF FUNDRAISING

Ready Made Fundraisers

ICON SALES

Order the paper icons from the SOGA State Office. Get local businesses (banks, stores, libraries, Recreation Departments, schools) to agree to sell the icon for \$1 and display in their office. ALL proceeds benefit YOUR program. Steer clear of chains. As part of a statewide partnership the following have already agreed to participate and SHOULD NOT be contacted – Chevron, Quick Trip, Kroger, Publix, Harvey's Supermarkets, Target, Walmart, and CVS. Icons can be purchased from the State office for \$.04 each and come in packets of 250 = \$10.00 total cost.

FUN-FILLED FUNDRAISING IDEAS AND EVENTS TO RAISE EMPLOYEE SPIRITS AND FUNDS FOR SPECIAL OLYMPICS

The following are ways in which a company or group can raise money for their local Special Olympics. A company may consider having one signature fundraising event that encourages all employees to organize for their local Special Olympics Program. This may have a greater media impact for a company as well as create a common bond between your employees throughout the world.

Silent Auction

- Develop a committee to plan and implement the auction. The following are a few helpful steps:
 - Hold a brainstorming session with your committee and divide the ideas for auction items into categories such as: travel, sports equipment, sports tickets, entertainment, home products, computer products, and autographed items
 - Ask your committee members to think of personal contacts who may have the ability to get auction items and send requests in writing
 - Set a goal of acquiring 50 high-ticket items and 50 medium-ticket items
 - Hold a preview cocktail reception to put guests in the bidding mood, you may want to have music as well
 - Display all your auction items attractively
 - Find a location to hold the event. It can be at a company facility, a house, a museum, or tied to an event, e.g., a dinner gala already being organized by Special Olympics
- Event planning time: approximately 6 months

Fun Run

- Develop a committee to plan and implement a Fun Run. The following are a few helpful steps:
 - Determine distance and location of the run (it should begin or end at a location of significance)
 - Develop teams with employees from your company and other companies (maybe your customers or suppliers) and include Special Olympics athletes
 - Develop a T-shirt to give to all registered runners
 - Decide an appropriate entry fee for competing teams
 - Have juice and fruit donated for snacks at the end of the race
- Event planning time: approximately 6 months

Plane Pull

- Develop a committee to plan and implement a Plane Pull. The following are a few helpful steps:
 - Corporate teams compete by pulling an airplane 12 feet and the winner is the team with the quickest time
 - Form corporate sponsored teams of 20 people on each from your company, customers, and suppliers
 - You will need an airplane to borrow for the event and it can be a private plane or a plane loaned by an airline. This event attracts the media and an airline may want the press association and will donate the plane
 - Set an entry fee for a team relatively high (e.g., \$500 per team) because many companies will pick up the cost of their employee team
 - Make sure to invite the media to your event
- Event planning time: 3-4 months

Golf Tournament

- Develop a committee to plan and implement a Golf Tournament. The following are a few helpful steps:
 - Find a golf course that will donate their facilities for this event
 - Select tournament style (regular play, scramble, etc) and how many golfers are the maximum
 - If possible, get printing of invitations and collateral material for tournament donated
 - Invite individuals from your company, customers, suppliers and any neighboring companies to send four-somes to play
 - Charge a high fee per four-some whereas many companies will pay for their employees to play
 - Get golf shirts, goody bag items, and awards donated
 - Provide lunch to the golfers (donated if possible)
 - Invite local celebrities and athletes to attend and present the awards to top four-somes
- Planning time: approximately 8 months

Drawings

- Develop a committee to plan and implement the Drawing. The following are a few helpful steps:
 - Find a top prize, for example, a weekend for 2 at a particular resort that will give you a deal or donate the weekend, a computer that your company can get donated, or a car that you can get donated or purchase at a low cost.
 - Get tickets printed and select a date for the drawing
 - Have the employees sell the raffle tickets to their friends, family, and clients
 - Hold the drawing somewhere in a public area
 - Make sure the winner gets their prize
- Event planning time: 2 months

Bowl-a-thon

- Develop a committee to plan and implement a Bowl-a-thon. The following are a few helpful steps:
 - Plan the bowl-a-thon with your local Special Olympics Program during the Special Olympics/AMF bowl-a-thon month in October (your local Special Olympics office will have a bowl-a-thon "how to" handbook)
 - Determine the number of participants the center can hold
 - Designate donation amount per lane or per team (many companies will pay for their employees to play)
 - Invite individuals from your company, customers, suppliers and any neighboring companies to send four-somes to play
 - Get goody bag items and awards donated
 - Invite athletes to attend and present the awards to top four-somes
- Planning time: approximately 4 months



The State-wide Fundraiser to Benefit Special Olympics Georgia

What: Change is collected during Exceptional Child Week (Usually the first week of March). Schools can collect change and have classes compete to see who can collect the most. Local Restaurants and Businesses can set up canisters to collect change too. In addition to benefiting Special Olympics financially, this event can be used for instruction (counting money, measuring, statistics, etc.) The state office will provide collection cans for you to use and will coordinate the PR statewide.

Why: This is an easy fundraiser for you to coordinate with your local program. The SOGA State Office provides the supplies you need as well as the PR. Your local program keeps 85% of the funds and you only send 15% of the money you raised to the state office to cover the cost of canisters, posters, etc.

Who: Open to any accredited Special Olympics Local or Area Program.

Background: Since Change for Champions started in 2003, more than \$100,000 has been raised for local programs. You can raise money with **no risk or expense to your school or local program.**

What are the benefits are getting involved with this program?

Local Programs can 'piggy-back' on statewide publicity and awareness that is built during Exceptional Child Week. They can focus their energies on recruiting volunteers and getting groups to participate instead of on promoting the event in the community. Change for Champions can become the 'signature' event for Special Olympics Georgia so that we build anticipation with the community and they plan on our event each year.

First Steps: Get approval from your local school system, board of education, etc to conduct this event.

Contact your central office to fill out any forms you need to get it on the school calendar. Once you have approval, contact the Atlanta State office at the number below: 770-414-9390 x 116

SPECIAL OLYMPICS GEORGIA FUNDRAISING PROJECT AUTHORIZATION FORM

Permission to conduct any fundraiser project to benefit Special Olympics in the State of Georgia must be requested at least **30 days** prior to the project's start date. It is anticipated that any/all fundraising projects will be limited to special events (e.g. car washes, dinners, softball tournaments, road races, etc.) and occasional requests to locally owned businesses for in-kind gifts of products/services to support games and competitions. A comprehensive list of all prospects to be solicited must be submitted to the State Office for approval. In almost all cases, direct approaches to 1) large corporations, 2) businesses that are not specifically locally owned and operated, and/or 3) any company or business that sponsors SOGA or SOI events should not be planned. SOGA will not assume responsibility for any expenses incurred from your event.

Please note: before any solicitations in your community can start or any publicity announcing your event begins, approval must be granted by Special Olympics Georgia State Office, even if you have completed this form for the same event in past years, you must fill it out for the current year.

AREA: LOCAL PROGRAM/COUNTY:

PROJECT/EVENT NAME:

DESCRIPTION (including location, target population, cost per person, and event details):

PROJECTED INCOME: \$ PROJECTED EXPENSES OF FUNDRAISER: \$

DATE OF EVENT/PROJECT: # OF PARTICIPANTS:

WILL YOU NEED LIABILITY INSURANCE COVERAGE FOR YOUR EVENT? YES NO
(fees for insurance coverage must be paid by your local/area program)

COORDINATOR'S NAME/TITLE:

EMAIL: PHONE #:

COORDINATOR'S ADDRESS:

ITEMS/ASSISTED NEEDED FROM STATE OFFICE (this could include listing on the SOGA website if desired):

LIST OF BUSINESSES TO BE CONTACTED (attach a separate sheet if necessary):

FOR STATE OFFICE USE APPROVED: DATE: ACTION:

Please fill out this form completely and mail to: Special Olympics Georgia 4000 DeKalb Technology Pkwy,
Bldg 400, Suite 400, Atlanta, or FAX to 770-216-8339

SAMPLE THANK YOU LETTER

Name Business Address City, State Zip code

Dear Salutation,

On behalf of the 22,769 registered athletes of Special Olympics Georgia, I want to thank you for your generous contribution of: ____X____ for ____Y____. Your contribution supports our mission of providing year-round sports training and athletic competition in 23 sports to children and adults with intellectual disabilities in Georgia.

The goal of Special Olympics is to provide a quality program that improves the life of every individual with an intellectual disability in the state. Enhancing the quality of athletes' lives gives each of us personal fulfillment and joy in our own lives. While our athletes take home medals and ribbons, you will take home pride and satisfaction knowing your contribution has given every athlete the chance to be their personal best.

Special Olympics Georgia depends entirely on donations in order to offer programs statewide. We are a 501(c)(3) nonprofit organization and do not receive government funding. Therefore, SOGA relies heavily on community partners and individuals to fulfill its mission. Without support such as yours, we would not be able to offer such quality programs to deserving Georgia citizens.

Loretta Claiborne, a Special Olympics athlete, eloquently summed up the importance of Special Olympics by saying, "Thirty years ago, I was told that I wasn't going to be anybody, that I would be put in an institution. Special Olympics changed the direction of my life. It's all about possibilities, no limits. I stand here today to say that I am somebody."

Inspired by their greatness,
Person Sending Letter
Position

Please consult your income tax preparer regarding the value and potential deductibility of your donation. IRS Publication 526 (Charitable Contributions) and IRS Publication 561 (Determining the Value of Donated Property) may also be consulted for guidance. These documents are available on line at www.irs.gov. As required by IRS Regulation, we represent that we have not provided you with any goods or services in exchange for this contribution.

SAMPLE WELCOME LETTER & LOI

[name of event] Action Item Check List

- Please verify that this logo is correct, this is what we will use in all [Event Name] printed material. Also email me one or two sentences to include in your section of the Program Book. You can include information about [company], your volunteers, or well wishes for the athletes.

VERSION OF LOGO HERE

- Designate a point person for your employees to contact to sign up to volunteer. That person should contact our [Title], [Name] at [Contact Number] or via e-mail at [email address] for volunteer applications.
- Schedule a conference call with [contact name] to develop a volunteer schedule of shifts and needs similar to that used last year.
- Provide banner(s) to [name of games group or agency] for placement at [name of event].
- We will send you invitations to the Opening Ceremony[if applicable]. Please let us know who will be coming so we can be sure to have them on the sign-in list.
- Executives can be award presenters during the weekend. The shifts are usually 1 – 2 hours at various venues. Determine if any of your executives might want to participate.
- Please sign and fax a copy of the official Letter of Intent that is attached for you and please be sure to have your sponsorship funds sent to the [company] office by [deadline date].
- If your company would like to have shirts made, we can provide the [event or agency] logo and a couple of suggested companies to use.
- If you would like information regarding your company and it's services/products to be included on our website, please email a brief bio and homepage link by [date].
- Send product/information to be inserted in goodie bags to the [company] office by [date]

SAMPLE INVOICE

INVOICE

TO: [contact name] [company name] [company address] [city], [state] [zip code]
DATE: [date]



Special Olympics
Georgia

Quantity	Description	Value
1	[sponsorship sold] [tax ID number]	\$ [amt.]

Mail to: [solicitors name] [solicitors position] [solicitors organization] [organization address] [city], [state]
[zip]

THANK YOU!

SAMPLE PROPOSAL LETTER

[date]

[contact name] [company name] [street
address] [city], [state] [zip]

Dear Mr./Ms./Mrs. [contact name]:

Last year almost [number] athletes and coaches had a wonderful weekend of high quality competition and peer interaction in a safe, welcoming environment at the [event name] in [event location] last [month last year's competition occurred]. For a few days, the city of [event city] got to experience Special Olympics and was able to embrace the idea that people with intellectual disabilities can be respected, valued, contributing members of society. The [event name] were tremendous and we are very much looking forward to this year's event.

In 2006, our goal is to increase the number of athletes who can attend each of our competitions. We know that participation in Special Olympics Georgia makes a meaningful, positive impact on the lives of our athletes. In 2004, a study conducted by the University of Massachusetts Boston and the University of Utah found that 52% of Special Olympics athletes are employed while only 10% of the general population of adults with intellectual disabilities are employed. This contrast demonstrates how important Special Olympics is to people with intellectual disabilities. Skills are developed through involvement in the program that enable our athletes to participate more fully in their communities, being active, engaged citizens who effect the economy and vibrancy of the places where they live. Events like the [event name] are the avenues for Special Olympics athletes to hone their skills.

During Special Olympics Georgia competitions, Special Olympics athletes will be on center stage where their abilities, not their disabilities, will be highlighted. Athletes and their families are not charged to participate in our program so we must raise all of the money necessary to fund the high quality events. We hope that you can join us at the competition this year.

I'm writing to ask [company name] to consider one of the following sponsorship opportunities for the Special Olympics Georgia [event name]: [sponsorship opportunity #1] [donation value required] or a [sponsorship opportunity #2] [donation value required].

However, any gift you make will help and we would be grateful. Because Special Olympics Georgia is not a United Way agency and does not receive any government funding, it is vital to our program that we have caring people like you who believe in our mission. Funds will specifically be used for [list what the funds will be used for].

The true measure of our success comes with the joy of achievement that our athletes receive from competition. It comes through the sense of belonging and fellowship that athletes experience traveling to State Games. Special Olympics athletes are determined to do their personal best during competition. Such determination reminds us of the spirit we long to find everyday of our lives. In giving their all, the athletes help us each understand that there is no real disability, only many different types of abilities; no real weakness, only many different forms of strength; no real wealth, only the richness of unlocking the gifts of others and of ourselves.

We look forward to seeing you at the [event name] in [event city]. Should you have any questions, please contact me at [phone number] or via email at [email address].

Sincerely,

[person sending the letter's name] [position
at Special Olympics]

Special Olympics [event name] Benefits [city/state hosting event]
Public Relations Benefits

Supporting Special Olympics Georgia is not just a 'good thing to do in the community'. It is a smart business decision:

- Special Olympics has 97% name recognition.
- 68% of the public say that they feel more positive about companies that support Special Olympics.
- If given the choice of two products with similar price and quality, 56% of the public said they would "almost always" or "frequently" chose a product because it is associated with Special Olympics.
- 77% of the public say they would be "extremely" likely to spend a little more to purchase a product or service if they thought they were helping Special Olympics.
- 1 in 6 people are touched by Special Olympics (volunteers, donors, athletes, family of athlete, etc.).

Sponsor Benefits

[sponsorship level]

[donation amount]

*** [if sponsorship is limited to a certain number detail that here]

- [list all benefits}

[sponsorship level]

[donation amount]

*** [if sponsorship is limited to a certain number detail that here] • [list all benefits}

Memo

Special Olympics Georgia

4000 DeKalb Technology Pkwy
Bldg 400 Suite 400 Atlanta, GA
30340 770-414-9390x111
Fax: 770-216-8339

To: Special Olympics Volunteers
From: Director of Development
Re: Fundraising Authorization Form

Please complete the attached Fundraising Authorization Form and submit it to the state office, a minimum of **30 days** prior to your event and before initiating any fundraising activities (this includes special events like bake sales, car washes, golf tournaments, etc., as well as requests to foundations, companies, individual sponsors, letters, campaigns, etc.). The form can be mailed or faxed to the state office.

Within 5 business days after receipt of the form, you will receive an email response with questions and/or approval. Your Regional Manager will be copied on it as well. If the event is not approved, you will also be notified within two days with instructions about what to change in order to get approval. Please be sure to include your email if possible.

It is important for this form to be complete for several reasons: strengthens local community support, prevents overlapping events, opens communication channels, enables the state office to provide assistance/advice on events, builds historical records, helps to prevent 'fake' events, and prevents confusing potential donors.

We want to ensure that we do not make multiple donation requests to the same person or business. When this does occur, potential donors find it confusing and usually decide not to give on any level. It is important that we continue to build a strong donor base on all levels so that the athlete's fees for games remain as affordable as possible and so that your local program can function well. When we confuse donors by making multiple requests, it has a negative impact on the organization as a whole and ultimately impacts the athletes.

From time to time local officials or community members will call the state office to verify that a fundraiser is legitimate and that the funds raised are truly being directed to Special Olympics Georgia. In order to ensure that all fundraisers conducted are recognized, it is imperative for the Fundraising Authorization Form to be completed. If there is not a completed form on file when a call is received in the state office to verify an event, then steps will be taken to end the event immediately. This step will help prevent the fraudulent use of the Special Olympics Georgia name.

The Development Staff is happy to speak with you about your ideas for raising money at any time. We may have some helpful suggestions to enable you to better reach your goals. Please call us with any fundraising questions.

Thank you!



Special Olympics
Georgia

SECTION 0 SCHOOL PROGRAMS AND SERVICES

SO GET INTO IT

SPECIAL OLYMPICS GET INTO IT

Special Olympics Get Into It is a valuable program that will promote the Special Olympics movement in the Georgia Public School System. Providing the element of redelivery and /or introduction of Special Olympics Programs will provide school systems in the state of Georgia the opportunity to have human resources available in addition to the free printed resources provided by Special Olympics Incorporated and Special Olympics North America. School Systems and other organizations interested in **SO Get Into It** will be able to request teacher in-service, direct delivery (in specific classrooms), or other types of assistance with the curriculum. Training teachers how to implement this program will allow **SO Get Into It** to be taught to thousands of students for years to come. Implementing this program within each of the 18 areas will allow for continuous growth throughout the state.

Through SO Get Into It, students will learn about the Special Olympics experience and all its positive messages. They will come to understand the athletes' ability to contribute to society through leadership roles both on and off the playing field. They will come to appreciate the critical role of serving-learning. Most important, they will be invited to make a difference themselves.

SO Get Into It is about the world of winners called Special Olympics, but it is much more: it is a portal through which young people can discover the pathway to building a more welcoming society for all. For more information please contact the Atlanta State Office [770-414-9390](tel:770-414-9390)

ATHLETE HEALTH SCREENINGS IN SCHOOLS (MEDFEST)

Special Olympics Georgia Medfest What is Medfest? Medfest is a working and innovative partnership between Special Olympics Georgia (SOGA) and volunteer health care professionals throughout the state of Georgia, in which we come to your community or school to conduct athlete health screenings.

Medfests allow those with intellectual disabilities to receive a basic health screening and register for Special Olympics of Georgia.

Why Georgia?

Georgia continues to be one of the fastest growing states in the Nation and the capacity for athlete growth and participation is just waiting to be cultivated! Medfests can be conducted at schools, recreation settings, group homes or other facilities.

Benefits

- (1)** Leverages visibility and raises public awareness about those with intellectual disabilities
- (2)** A more cultivated partnership between local health care providers, their local community and schools
- (3)** No cost health screening with possible referrals
- (4)** Positive public relations and possible media coverage for all involved
- (5)** Creates the opportunity for many-even hundreds of individuals with intellectual disabilities to train and compete in year-round sports programs
- (6)** Markets your school, organization, or agency commitment to those with intellectual disabilities

A screening is quite simple and takes about 6-8 minutes and is conducted by a licensed physician or chiropractor for the State of Georgia. Additionally, a SOGA staff member is present. The screening is composed of the following:

- assessment of short medical history
- height, weight and blood pressure
- musculoskeletal check
- cardiovascular check
- joint/range of motion check

For more information about FREE athlete screenings and how to conduct a Medfest in your community or school, please contact:

Special Olympics Georgia (770) 414-9390 ext 113



SECTION P PUBLIC RELATIONS

SPECIAL OLYMPICS GEORGIA BASIC PRESENTATION

MISSION

The **mission** of Special Olympics Georgia (SOGA) is to provide year-round sports training and athletic competition in a variety of Olympics-type sports for children and adults with intellectual disabilities, giving them continuing opportunities to develop physical fitness, demonstrate courage, experience joy, and participate in the sharing of gifts, skills and friendship with their families, other Special Olympics athletes, and the community.

The program is for athletes eight years of age and older that have been identified as having intellectual disabilities.

HISTORY

-**Eunice Kennedy Shriver** founded Special Olympics in 1968.

-It was her vision that people with intellectual disabilities had an ability to learn sports skills and had the desire to train and compete. Over 39 years and 1.2 million athletes later, we see that her vision held very true.

-**The Georgia program** of SOGA was formed in 1970 with only 500 athletes who gathered for an Athletics event. Today through dedicated volunteer and staff work, the number has increased to over 22,769 athletes in Georgia.

-As large of a number as that may sound, there are still over thousands of individuals eligible for the program.

-Athletes participate for FREE and are offered 23 sports statewide.

-The program remains supported through various contributions:

- ⑩ Individual contributions (largest)
- ⑩ Corporate sponsorships
- ⑩ Special events
- ⑩ In-kind donations
- ⑩ NO funding from federal/state funds or Special Olympics, Inc. (SOI)
- ⑩ SOGA is not a United Way agency

STRUCTURE OF PROGRAM

23 sports -Alpine Skiing, Aquatics, Athletics, Badminton, Basketball, Bocce, Bowling, Cycling, Equestrian, Floor Hockey, Golf, Gymnastics (Artistic and Rhythmic), Ice Skating (Figure and Speed), Long-distance Running/Walking, Power lifting, Sailing, Soccer, Softball, Table Tennis,

Tennis, Volleyball

All governed by the **"Sports Advisory Council"** who provides technical assistance to state, local and area management teams, coaches certification clinics, and athlete training camps.

In addition to above, **the Motor Activities Training Program (MATP)** is offered to individuals with more severe disabilities who cannot compete in rigorous activities.

- May begin training at 6 years old, compete at age 8.
- All events are **divisioned** first by age, then by sex, then ability. Divisioning is a fair and consistent way to assure that athletes have a fair chance against their opponents.
- There **are Invitationals that act as qualifiers** for State events. Just like regular sports with leagues, then regionals and then on to states.
- Athletes compete in three different ways:** individual, team sports and Unified Sports.

BENEFITS OF PROGRAM

The program transcends just sports competition. Special Olympics athletes are confident and independent. They have jobs, they make speeches, they live on their own, and they inspire others.

- Physical:** The Surgeon General released information in 2001 about the poor health of people with intellectual disabilities.
 - o Special Olympics engages the athletes in regular, monitored physical activity, which can ultimately help with combating heart disease, obesity, etc.
- It is common knowledge that exercise is an important part of a healthy lifestyle. People with intellectual disabilities do not usually join community recreation leagues or even have friends they can go 'work out' with.
 - o Special Olympics offers a platform for the athletes to stay physically fit.
- Mental:** Knowledge of rules and strategy along with increased self-esteem, self-confidence and pride.
- Social:** Participation in Special Olympics builds self-awareness, teamwork, and discipline. All of which are needed for steady employment and independent living.
 - o Teamwork, interaction with peers and people without intellectual disabilities, opportunity to travel and learn about other places and interests, family pride, and increased community awareness and acceptance.
 - o It provides a safe arena for peer interaction. Often, after students leave the school system, they also leave their peer network. Opportunities and events to network with peers are limited. Such isolation can ultimately hinder the development of social skills and those skills needed to work or live independently.

Athlete Involvement

ALPs – Athlete Leadership Programs – ways to get athletes involved in a leadership role and a way for their voices to be heard. Examples are:

-Global Messengers -Athletes that are trained representatives of SOGA. They make speeches and appearances around the state sharing their personal involvement.

They are crucial in recruiting athletes & volunteers and enhancing public awareness. Audiences are moved by the athletes' stories because they are truly speaking from their hearts.

-Athlete Input Council – Forum for athletes to address issues concerning the program. AIC meets three times per year to discuss anything that is on their mind relating to SOGA. This gives them a sense of how important their input is.

Other Opportunities

- Many schools do not provide competitive sports for their special needs students – they get students involved by letting them be ball boys/girls, team managers and such, but it’s just not enough and the students can do so much more if they are only taught.
- Serve on a local management team, become a coach, assistant coach, games official, or volunteer board. -Gives Special Education students the chance to get involved with their community and gives them something to look forward to at school.
- Physical Education teachers can organize Special Olympics clinics and events.
 - Teachers and students can work together to create, manage and coach a Special Olympics team.
- Unified Sports – started in 1987 – athletes with and without intellectual disabilities. Mainstreams special education and other students in athletic competition. Forms friendships, fun group activity for a team sport.

Family Involvement -Family Action Network (FAN)

- Networking and support group for family members of athletes.
- Sells souvenirs at many SOGA functions, and the profits are used to support FAN sponsored activities.
- FAN hosts family gatherings at State and local competitions, provides camp scholarships, and sponsors speakers for the Family Sessions at the annual SOGA Leadership Conference.
- Sponsors family camp for athletes and their families, camps have been held in Savannah and Winder. Scholarships are available through FAN for those needing assistance.

State Events

Indoor Winter Games – Marietta 1600 athletes 1,500 volunteers
Basketball, Bowling, Floor Hockey, Ice Skating, Powerlifting, Rhythmic Gymnastics, Roller Skating

Summer Games – Atlanta 1600 athletes 2000 volunteers
Aquatics, Artistic Gymnastics, Athletics, Badminton, Soccer, Table Tennis, Tennis, Volleyball

Fall Games - Gainesville 1,500 athletes 1,350 volunteers
Bocce, Cycling, Golf, LD Running, Softball

State Horse Show – Albany 200 athletes 250 volunteers

Master’s Bowling Savannah 559 athletes 350 volunteers

***Regional (SE) and National competitions are also offered

***World Games are held every two years – alternating between Winter and Summer sports

Volunteer Programs

Coach Special Olympics athletes need proper training from devoted coaches and assistant coaches. Coaches go through a training/certification sessions that will explain what is expected and what to expect during training.

Games Management Team This team of individuals is devoted to planning, organizing and implementing each of the 5 state competitions. Volunteers organize and plan every aspect of the state competitions from the Athlete dance to each sporting venue.

Local Management Team / Area Management Team The state is divided into 18 areas with several local programs making-up each area. Volunteers organize and efficiently run the local or area Special Olympics program.

Local Coordinator Plan and implement local events for the area. Manage media, organize volunteers, and are volunteers themselves. Make our program succeed.

Office Support Volunteer during the week doing administrative work.

Special Event Volunteer Several fundraisers that need planners, recruiters and participants.

Special Olympics Young Leaders (S.O.Y.L) A group of professionals who want to make a difference. S.O.Y.L members are liaisons between SOGA, other young professionals and the corporate world. Members volunteer and network on behalf of SOGA while socializing and having fun!

Law Enforcement Torch Run (LETR)

The largest annual fundraising event benefiting Special Olympics Georgia. LETR involves more than 1,500 law enforcement officers from over 100 agencies who take part in fundraising and a 1,000 mile, two week torch relay to pass the "Flame of Hope" across the State. The torch relays converge at Emory University (Atlanta) during the State Summer Games Opening Ceremony.

**Other funds are raised through special events, and donations from individuals, corporate sponsors and foundations.

SPONSORS

Statewide Partners: UPS and Money Mailer, Publix
Official State Sponsors: The Coca-Cola Company

Questions?

SPANISH TRANSLATION

Please visit www.specialolympicsga.org – click on “SOGA in your community” to find Spanish forms for athlete registration or contact our regional manager.

About Us

Our goal is to help bring persons with intellectual disabilities into the larger society under conditions whereby they are accepted, respected, and given the chance to become useful and productive citizens. When we achieve this goal through our sports program, we demonstrate that Special Olympics has a unique value: to show the world that every person counts and that every person can be something good when we work together.

Special Olympics Georgia invests in people with intellectual disabilities, helping them to develop athletic

skills, while also promoting the abilities of the athletes off the field.

When our athletes succeed, attitudes change, communities develop, health and self-esteem are built, and the eyes of the world are focused on all that is good and hopeful and positive.

Athletes gain skills for employment, learn independent living skills, form relationships and help others understand their extraordinary capabilities despite health issues they experience daily. 23 different sports are offered for athletes to experience -ranging from badminton, swimming, soccer and gymnastics. Athletes ranging from age six through senior participate in Special Olympics, gaining life skills and confidence in their athletic ability.

SOGA is truly a grass roots effort. Only through a volunteer base of more than 15,000 are we able to fulfill our mission in serving our athletes and continue to grow. The volunteers are dedicated to providing the highest quality programs and services to the athletes and serve as area directors, certified coaches, event staff, unified sports partners and fundraisers. The continuing success of the organization depends on the ongoing support of the community.

Through the program, 22,769 Georgia athletes are given the chance to express themselves and test their limits, however SOGA is currently serving only 25% of the eligible population! You can help these athletes in various ways; by volunteering, coaching, donating or sponsoring an athlete or event.

The Athletes of Special Olympics Georgia

Thousands of children and adults with intellectual disabilities see a dream come true as they train, compete and succeed in more than 500 sports competitions at the local, area, and state levels.

Special Olympics Georgia hosts six state-level competitions throughout the year. Athletes may also compete in Southeast Regional events offered in alpine skiing, ice skating, tennis, sailing and powerlifting.

Every two years, the Special Olympics World Games are held, alternating between Winter and Summer Games. These are patterned after the traditional Olympic Games and follow many of the same customs, rules and regulations.

Training

Athletes are required to engage in an eight-week training program prior to any Special Olympics competition to develop fitness and skills and learn rules and strategies from their coaches. Special Olympics also trains and certifies coaches, officials and games management team members to ensure that all athletes receive the highest quality training and competition.

Become an Athlete

Special Olympics is the world's largest program of sports training and athletic competition for children and adults with intellectual disabilities. Nearly 2 million athletes around the world benefit from participation in Special Olympics.

In Georgia, nearly 22,769 athletes are already competing.

Special Olympics Georgia offers training and competition opportunities in **23 Olympic-type sports** for athletes 8 years or older.

No matter what your ability level, **you can benefit from Special Olympics**. And no matter what your interest, there is a sport for you.

There is no charge to participate in Special Olympics.

Eligibility

To be eligible to participate in Special Olympics, athletes must be at least 8 years old and identified by an agency or professional as having one of the following conditions:

1. Intellectual disability;
2. A cognitive delay as determined by standardized measures such as intelligence quotient or other generally accepted measures; or a closely related development disability, i.e., functional limitations in both general learning and adaptive skills.

There is no cost to participate in Special Olympics. All prospective athletes must register to participate in Special Olympics.

Contact the **Regional Manager for your area** for registration information.

Age Requirements

There is no maximum age limitation for participation in Special Olympics. The minimum age requirement for participation in Special Olympics competition is 8 years of age. An **Accredited Program** may permit children who are at 2-7 years old to participate in age-appropriate Special Olympics training programs offered by that Accredited Program, or in specific (and age-appropriate) cultural or social activities offered during the course of a Special Olympics event. However, no child may participate in a Special Olympics competition (or be awarded medals or ribbons associated with competition) before his or her 8th birthday.

Identifying Persons with Intellectual Disabilities

Special Olympics uses the definition of intellectual disabilities provided by the World Health Organization (WHO), the United Nations' specialized agency for health. According to the WHO, intellectual disability is a condition of arrested or incomplete development of the mind characterized by impairment of skills and overall intelligence in areas such as cognition, language, and motor and social abilities. Intellectual disability can occur with or without any other physical or mental disorders. Although reduced level of intellectual functioning is the characteristic feature of this disorder, the diagnosis is made only if it is associated with a diminished ability to adapt to the daily demands of the normal social environment. (Visit www.who.int for more information.)

A person is considered to have an intellectual disability for purposes of determining his or her eligibility to participate in Special Olympics if that person satisfies any one of the following requirements:

How prevalent are intellectual disabilities? Intellectual disability knows no boundaries. It cuts across the lines of racial, ethnic, educational, social and economic backgrounds, and it can occur in any family. According to the WHO 's World Health Report 2001, the overall prevalence of intellectual disabilities in the world is believed to be between 1 percent and 3 percent, i.e., as many as 190 million people have intellectual disabilities — the largest disability population in the world.

- The person has been identified by an agency or professional as having an intellectual disability as determined by their localities; or
- The person has a cognitive delay, as determined by standardized measures such as intelligent quotient or "IQ" testing or other measures that are generally accepted within the professional community in that Accredited Program's nation as being a reliable measurement of the existence of a cognitive delay; or
- The person has a closely related developmental disability. A "closely related developmental disability" means having functional limitations in both general learning (such as IQ) and in adaptive skills (such as in recreation, work, independent living, self-direction, or self-care). However, persons whose functional limitations are based solely on a physical, behavioral, or emotional disability, or a specific learning or sensory disability, are not eligible to participate as Special Olympics athletes, but may be eligible to volunteer for Special Olympics as partners in **Unified Sports®**, if they otherwise meet the separate eligibility requirements for participation in Unified Sports set forth in the Sports Rules.

Degree of Disability

Participation in Special Olympics training and competition is open to all persons with intellectual disabilities who meet the age requirements, regardless of the level or degree of that person's disability, and whether or not that person also has other mental or physical disabilities, so long as that person registers to participate in Special Olympics as required.

Multiple Handicaps

Persons who have multiple handicaps may participate in Special Olympics provided they are eligible as noted above.

Profound Disabilities

Individuals with profound disabilities can participate through Special Olympics **Motor Activities Training Program (MATP)**, developed by physical educators, physical therapists and recreation therapists. MATP emphasizes training and participation rather than competition.

Through the program, 22,769 Georgia athletes are given the chance to express themselves and test their limits, however SOGA is currently serving only 23% of the eligible population! You can help these athletes in

various ways; by volunteering, coaching, donating or sponsoring an athlete or event. Contact SOGA to find out how you too can Be A Fan -770-414-9390 ext. 120, or outside the Atlanta area, call 1.800.866.4400. Mickie Stewart -Local Coordinator said, "Special Olympics amazes me with the rapid changes through the many years I have been involved. Athletes are better trained, coaches are getting certified and Unified Sports ® has gone way beyond what we ever thought it would. Special Olympics is no longer thought of as just a 'fun day' but as a well-planned, athlete-trained 'sporting event'."

Sign Me Up

If you're interested in competing in Special Olympics, follow this link to find your local Regional Manager, and receive information on Special Olympics in your area;

[SOGA in your community -Regional Map](#)

Sports Available

- . •Alpine Skiing
- . •Athletics
- . •Aquatics
- . •Badminton
- . •Basketball
- . •Bocce
- . •Bowling
- . •Cycling
- . •Distance Running/Walking
- . •Equestrian
- . •Floor Hockey
- . •Golf
- . •Gymnastics – Artistic
- . •Gymnastics – Rhythmic
- . •Ice Skating
- . •Powerlifting
- . •Sailing
- . •Soccer
- . •Softball
- . •Speed Skating
- . •Table Tennis
- . •Tennis
- . •Volleyball

Additional Programs

Special Olympics Georgia is committed to empowering people with intellectual disabilities on and off the playing field. By working to remove obstacles, change attitudes and open minds, Special Olympics provides opportunities for its athletes to demonstrate courage, experience joy and share their gifts, skills and friendship with the world. Special Olympics initiatives change lives: [Athlete Leadership Programs](#) offer athletes the opportunity to take active leadership roles both on and off the playing field through self-directed, meaningful participation in virtually any aspect such serving on Boards of Directors, officiating competitions, or coaching other athletes.

Through its [Family Leadership and Support](#) initiative, Special Olympics offers families not just opportunities for sports, social interaction and fun, but also a much-needed support system.

The [Special Olympics Healthy Athletes®](#) initiative's mission is to improve each athlete's ability to train and compete in Special Olympics. The Special Olympics Healthy Athletes Initiative includes several disciplines: Fit Feet, FUNfitness, Health Promotion, Healthy Hearing, Opening Eyes® and Special Smiles®.

USING SOGA PHOTOS

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OTHER INFORMATION TOOLS (E-NEWSLETTER, BULK MAIL)

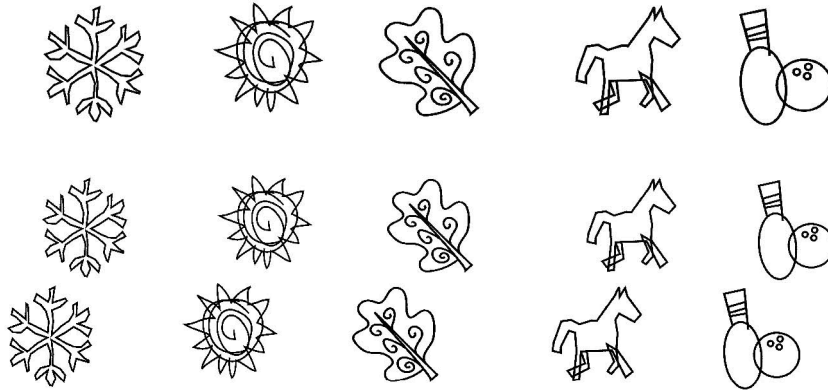
Other ways Special Olympics Georgia disseminates information about its organization is through a monthly e-newsletter, SOGA Connection, and print newsletter Georgia's Champions. Special Olympics Georgia also posts news releases on its Web site, as well as sends them out to media across the state. For each state games and for most special events, the organization blasts radio commercials advertising the events. SOGA staff are regularly interviewed on TV news, radio and print newspapers about Special Olympics Georgia. The organization also periodically sends out information on special events or ways volunteers and families can get state games pictures through mass e-mail blasts.

LOGO USE

SOGA LOGO



ICONS



Chief Executive Officer: Georgia Milton-Sheats

106 Oversee all aspects of Special Olympics Georgia. Liaison to Board of Directors, Honorary Board, SONA and SOI.

DEVELOPMENT:

*111 Director of Development & Major Gifts– Susan Skolnick - Foundations(72), Corporate Sponsorships over \$20,000, Winter Construction Golf, Marlow's Golf and Openings, Dunwoody County Club, Direct Mail, Telefunding, Individual Major Gifts, Dial America, Planned Giving, Charity Auto, Payroll Deduction, Individual Giving, Local/area fund raising forms, New Corporate Business, DD Sponsors

108 Senior Development Manager– Kerri Baldwin – All Games, Sports Camp and Athlete Camp Sponsorship. Corporate Sponsors up to \$20,000, Cultivation of new donors, SOGA/Corporate Banner placement at State Games, National/World Sponsors

120 Volunteer & Event Manager –Leslie Anderson– Volunteers, awards(24), Sam's Clubs (25), Summer Meals, Protective Behavior, volunteer of the month, grants(48) Annual Area/Local Volunteer Training via Conference Call

SPECIAL EVENTS:

**115 Director of Special Events -Allison Kaczinski- Torch Run Cops on Doughnut Shops, LETR Sponsors Cuffed for a Cause, Polar Plunge, Truck Convoy

107 Special Events Manager– Cassidy Moody– Special Olympics Young Leaders (SOYL), Boccefest, Bob Busse Golf Classic, Art Auction, Sailing Regatta, Duck Derby, Walmart Grants

119 Event Manager-Emily Young– Phone back up, Race for Champions, VIP Reception, SuperValu Golf, Phone Bones, Walmart Grants, SE Games, Grants(24), General Grants, Internal Awards(12), Annual Bowling Tourney, Opening Ceremony invitations, LETR Merchandising and monthly newsletter, Web Updates, Annual Valdosta Fundraising Event, Laurel Springs

EXECUTIVE:

110 Executive Assistant and Events Manager-Jennifer Daniell– Support to CEO (1 day) and Director of Development/ Major Gifts (1 day), Phones, Office Supplies, Outside Events, Grant Writing (7 per wk), Internal Awards(24) Annual Requests to Moose Clubs and American Legions, Annual proposal to all EMC's

117 Senior Public Relations Manager –Wendy Bigham-Civic Clubs, public speaking, photography, SEC/ACC coordinator, website maintenance, Georgia's Champions, Annual Report, Professional Sports Teams/Event Liaison, Statewide Media, State Games Footage, Monthly e-newsletter, grants, Minor League Sports, State Games Emcees, scripts and Grand Marshalls, Associations

*104/602 Vice President of Program—Robert Yost - Outreach, Statewide Area/Local Facilitator, Promotion & Growth of County/Area Accreditation, Master Calendar, State Games Nerve Center, Athlete Census/PIP, Family, DSA/Conference, Mattel Grant, SOI Fed Grant

114 Program Services Manager-Sean Mann-Applications for Participation, County/Area Accounts, County/Area Accreditation, Resource Guide, Agency Registration, Rosters, Games forms processing as needed, Regional Managers weekly mail, Unified Partners forms, Food—Masters, Fall Games, Horse Show, incentives, Wal. grants

116 Program Services Manager—Andrea Mosley - Healthy Athletes, GCA, Med Fest, Global Messengers, BRAG, InKind, Change for Champions, SOGA Net, Interns, General Grants(24) & Awards (12), Athlete Input Council, e-buddy, Olympic Town, Area 2

605 Regional Manager Kelly Hanks-Areas 12,13,17, Statistics, Web Updates, Opening Ceremony Fall/Masters, grants

113 Senior Regional Manager-Philip Rudolph- Areas 3, 4, 5, 18 SO Get Into It, Opening Ceremony Winter, Dunwoody Country Club Athletes

105 Regional Manager-Amber Mullins—Areas 1, 6, 9, Opening Ceremony Summer, Winter Games Food

601 Regional Manager-Charles White—Areas 10,11,14, Food Bank

606 Regional Manager– Rex Dorsey- Areas 8, 7, 16, Glynn County Local Coordinator, credentials, Opening Ceremony Horse Show

604 Senior Sports Manager– Stan Crance– Masters Bowling, Fall Games, Invitationals, Young Athletes, GMS training, Coaches Clinics, Games Awards, Area 15, Grants (12)

103 Sports Manager-David Crawford –Summer Games, Horse Show, Housing -State Games, Collection of fees, Invitationals, Coaches Clinics, Grants(12), GMS Trainings

122 Senior Coach Education and Program Manager-Kelli Britt- Coaches Education, Sports Camp, Athlete Camp, Evaluation State Games, World Games, National Games, SE Games, Sports Rules, Grants (12), Invitationals

112 Sports Manager– Daniel Lockart -Winter Games, Invitationals, Coaches Clinics, GMS, Signage, Grants, Asst. Camp Director

FINANCE:

*109 Director of Business Administration & H.R-Felicia Clayton.- Budget, Payroll, Human Resources, Leases/Contracts/ Maintenance Agreements, Internal Technology, Staff Dev.

101 Administrative Assistant-Frances Stein – Maintains Mailing Database, Accounting Backup, Phone backup, Accounts Payable/ Receivable, Pledging/Invoicing