

Delegation Entry Form

Special Olympics
Texas



| | | |
|------------|------|-------------|
| Entry Year | Area | Competition |
|------------|------|-------------|

▼ DELEGATION SUMMARY FOR COACHES USE ONLY ▼

| OFF-CAMPUS HOUSING | | | |
|---|------|--------|-------|
| GROUP | MALE | FEMALE | TOTAL |
| A. Special Olympics Athletes | | | |
| B. Minor Unified Partners (<18 yrs) | | | |
| C. Adult Unified Partners (>18 yrs, NOT CHPN) | | | |
| D. Adult Unified Partners (>18 yrs, ALSO CHPN) | | | |
| Grand Total of Athletes (add lines A+B+C+D): | | | |
| E. Remaining Adult Personnel (HDDL, HC/COST, CHPN, BSDR = >18 yrs) | | | |
| <i>FYI: Add Lines A+B = your athlete count for ratio by gender.</i> | | | |
| <i>FYI: Add Lines D+E = your personnel count for ratio by gender.</i> | | | |

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| <i>FYI: Add Lines D+E = your personnel count for ratio by gender.</i> | | | |

| DELEGATION INFORMATION | | | | | | |
|------------------------|---------------------|--|--|--|--|--|
| Delegation Name | Delegation Code | | | | | |
| Head of Delegation | Home Phone () | | | | | |
| Address | Work Phone () | | | | | |
| City/State/Zip | Cell Phone () | | | | | |
| HDDL Email | | | | | | |

| PERSONNEL INFORMATION | | | | | | |
|--|----|-----------|------------|---------|----------|------------------------|
| List all persons attending Area or State Games: Head of Delegation, Coaches, Chaperones and Bus Drivers. | | | | | | |
| HDDL Approved | | Last Name | First Name | Sex M/F | Hometown | Codes (See Code Sheet) |
| | 1 | | | | | |
| | 2 | | | | | |
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| | 10 | | | | | |