

# ATHLETE REGISTRATION AND INFORMATION



# Eligibility For Participation In Special Olympics

## GENERAL STATEMENT OF ELIGIBILITY

Special Olympics training and competitions are open to every person with intellectual disabilities who is at least eight years of age and who registers to participate in Special Olympics as required by the General Rules.

## AGE REQUIREMENTS

There is no maximum age limit for participation in Special Olympics. The minimum age requirement for participation is eight years of age. An Accredited Program may permit children who are at least six 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 a Special Olympics event. Such children may be recognized for their participation in such training or other non-competition activities through certificates of participation, or through other types of recognition approved by SOI which are not associated with participation in Special Olympics competition. However, no child may participate in a Special Olympics competition (or be awarded medals or ribbons associated with competition) before his or her eighth birthday.

## 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 intellectual or physical disabilities.

## IDENTIFYING PERSONS WITH INTELLECTUAL DISABILITIES

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

- 1) The person has been identified by an agency or professional as having an intellectual disability determined by their localities; **OR**
- 2) The person has a cognitive delay, as determined by standardized measures such as intelligence 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**
- 3) 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 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 which are outlined in the SOI Sports Rules.

## PARTICIPATION BY PERSONS WHO ARE BLOOD-BORNE CONTAGIOUS DISEASE CARRIERS

No Accredited Program or GOC may exclude or isolate from participation in any Special Olympics training or competition any athlete who is known to be a carrier of a blood-borne contagious infection or virus, or otherwise discriminate against such athletes solely because of that medical condition. Given the risk that one or more Special Olympics athletes may have a blood-borne contagious infection or virus, in conducting Special Olympics training and competition events, Accredited Programs and GOC shall follow so-called "Universal Precautions," or "Universal Blood and Body Fluid Precautions" for every exposure to any person's blood, saliva or other bodily fluid.

# Athlete Code of Conduct

**Local Programs: It is at your discretion if you wish for your athletes to sign the contract below**

Special Olympics is committed to the highest ideals of sport and expects all athletes to honor sports and Special Olympics. All Special Olympics athletes and Unified Sports Partners are expected to observe the following code:

## **Sportsmanship**

- I will practice good sportsmanship.
- I will act in ways that bring respect to me, my coaches, my team, and Special Olympics.
- I will not use bad language.
- I will not swear or insult other persons.
- I will not fight with other athletes, coaches, volunteers, or staff.

## **Training and Competition**

- I will train regularly.
- I will learn and follow the rules of my sport.
- I will listen to my coaches and the officials and ask questions when I do not understand.
- I will always try my best during training, divisioning, and competitions.
- I will not “hold back” in preliminary competition just to get into an easier finals competition division.

## **Responsibility for My Actions**

- I will not make inappropriate or unwanted physical, verbal, or sexual advances on others.
- I will not smoke in non-smoking areas.
- I will not drink alcohol or use illegal drugs at Special Olympics events.
- I will not take drugs to improving my performance.
- I will obey all laws and Special Olympics rules, as well as the International Federation and National Federation/Governing Body rules for my sport(s).

I understand that if I do not obey this Code of Conduct, I will be subject to a range of consequences by my Program or a Games Organizing Committee for a World Games, up to and including not being allowed to participate.

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Athlete Name

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Date

# Registering Athletes

- To properly prepare for competition, a minimum of eight weeks of organized training is required.
- **BEFORE training begins, it is the athlete/agency/school representative's responsibility to ensure the following forms have been correctly completed and on file with the local program and the State Office**

## 1. FORM A: ATHLETE REGISTRATION

## 2. FORM B: ATHLETE RELEASE

## 3. FORM C: COMMUNITY REINVESTMENT ACT This is optional

## 4. FORM N: COMMUNICABLE DISEASE WAIVER

**5. FORM Y: ATHLETE MEDICAL FORM:** Pages 1-3 to be completed by the athlete or parent/guardian/caregiver and brought to the medical exam. (Has the red banner at the top)

**6. FORM Z: MEDICAL PHYSICAL INFORMATION:** Page 4 to be completed by a medical professional. For example, Physician, Registered Nurse Practitioner, or Physician Assistant (Has the pink banner at the top) ***Athletes must have a physical exam completed a minimum of every 3 years.***

- It is the responsibility of the agency/school representative to keep accurate records of medical expiration dates. Please give sufficient notice to family members, guardians, school personnel, etc. that an athlete's medical form needs to be renewed.
- All forms must be completed to be considered valid.
- The forms listed above are **not** transferable. In other words, a High School Physical Form will not be accepted.

**Note:** It is the responsibility of Coaches/Chaperones to have copies of the forms in their possession during all practices and Special Olympics events.

**All forms can be found under the “Competition” tab on our website:**

**[www.sosd.org](http://www.sosd.org)**