

## 2026 STATE POWERLIFTING COMPETITION DELEGATION SUMMARY FORM

Name of Delegation: \_\_\_\_\_

Head of Delegation: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Total Number of Athletes: \_\_\_\_\_

Total Number of Registered Coaches/Chaperones Listed on FORM D: \_\_\_\_\_

Total number eating Saturday lunch:  
(No charge for registered coaches/chaperones/athletes) \_\_\_\_\_

Delegations will be charged for meals if an excessive number are requested but not eaten

***Return all forms to: Forms@SOSD.org***

## 2026 STATE POWERLIFTING COMPETITION ATHLETE EVENT REGISTRATION

Name of Delegation: \_\_\_\_\_

Head Powerlifting Coach (Level 2 Certified): \_\_\_\_\_

**ALL INFORMATION MUST BE INCLUDED FOR EVERY ATHLETE!**

**Athletes can register in 1 event ONLY. Place an "X" in the box to select this event.**

*Those entered into Double Combination will compete in both Bench Press & Deadlift.*

*Those entered into Triple Combination will compete in ALL three lifts.*

**S = Squat    B = Bench Press    D = Deadlift    DC = Double Combination    TC = Triple Combination**

| ATHLETES NAME | M/F   | AGE   | EVENTS ENTERED<br><small>1 box ONLY to be marked</small> |                          |                          |                          |                          | Body Weight<br>(lbs.) |
|---------------|-------|-------|--|--------------------------|--------------------------|--------------------------|--------------------------|-----------------------|
|               |       |       | S  | B                        | D                        | DC                       | TC                       |                       |
| 1. _____      | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 2. _____      | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 3. _____      | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 4. _____      | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 5. _____      | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
|               |       |       | S  | B                        | D                        | DC                       | TC                       |                       |
| 6. _____      | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 7. _____      | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 8. _____      | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 9. _____      | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 10. _____     | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
|               |       |       | S  | B                        | D                        | DC                       | TC                       |                       |
| 11. _____     | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 12. _____     | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 13. _____     | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 14. _____     | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 15. _____     | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
|               |       |       | S  | B                        | D                        | DC                       | TC                       |                       |
| 16. _____     | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 17. _____     | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 18. _____     | _____ | _____ | <input type="checkbox"/>                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |

S = Squat B = Bench Press D = Deadlift DC = Double Combination TC = Triple Combination

| ATHLETES NAME | M/F   | AGE   | EVENTS ENTERED<br>1 box ONLY to be marked |                          |                          |                          |                          | Body Weight<br>(lbs.) |
|---------------|-------|-------|---|--------------------------|--------------------------|--------------------------|--------------------------|-----------------------|
|               |       |       | S   | B                        | D                        | DC                       | TC                       |                       |
| 19. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 20. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 21. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 22. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 23. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 24. _____     | _____ | _____ | S   | B                        | D                        | DC                       | TC                       | _____                 |
| 25. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 26. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 27. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 28. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 29. _____     | _____ | _____ | S   | B                        | D                        | DC                       | TC                       | _____                 |
| 30. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 31. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 32. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 33. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 34. _____     | _____ | _____ | S   | B                        | D                        | DC                       | TC                       | _____                 |
| 35. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 36. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 37. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 38. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 39. _____     | _____ | _____ | S   | B                        | D                        | DC                       | TC                       | _____                 |
| 40. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 41. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 42. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |
| 43. _____     | _____ | _____ | <input type="checkbox"/>                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                 |

# Volunteer Roster

FORM L  
Revised 12/2025

School/Agency: \_\_\_\_\_

Event: Powerlifting

This form is required for all Local, Area, and State Games. All Special Olympics volunteer applicants (Class A) who have regular, close physical contact with athletes; are in a position of authority or supervision of athletes; are in a position of trust of athletes; and/or handle substantial amounts of cash or other assets of athletes, are subject to mandatory background / motor vehicle checks initiated and paid for by SOSD. **Form E (Class A Volunteer Application) must be on file at the State Office.** Examples of Class A volunteers includes, but are not limited to Coaches, Chaperones, and adult Unified Partners.

**All volunteers appearing on this roster must be at least 16 years of age and cleared by SOSD before attending an event.**

- **DO NOT LIST UNIFIED PARTNERS ON THIS FORM**
- **ONLY LIST EACH PERSON ONCE**

**HOD:** This describes a person over seeing an entire delegation and has completed Level 1 and 2 Coaches Training Courses (**One person per delegation**).

**Head Coach:** This describes a person who trains athletes, leads teams and has completed Level 1 and 2 Coaches Training Courses. (**Unified Head Coaches must complete these plus Coaching Unified Sports**).

**Coach:** This describes a person who trains athletes, leads teams and has completed Level 1 Coaches Training Course. (**Unified Coaches must complete these plus Coaching Unified Sports**).

**Chaperone:** This describes someone who supervises athletes. A Chaperone CANNOT coach athletes.

The maximum Coach/Chaperone: Athlete ratio is 1:1  
The minimum Coach/Chaperone: Athlete ratio is 1:4

**Area / State:** Put an X in the box indicating which event(s) each volunteer will be attending

| <b>HOD (Level 2 certified)</b>        |       |      |       | <b>Chaperone (Include Minors)</b>   |  |      |       |
|---------------------------------------|-------|------|-------|-------------------------------------|--|------|-------|
| Area                                  | State | Area | State | <b>DO NOT List Unified Partners</b> |  | Area | State |
| 1.                                    |       |      |       | 1.                                  |  |      |       |
| <b>Head Coach (Level 2 certified)</b> |       |      |       | 2.                                  |  |      |       |
| 1.                                    |       |      |       | 3.                                  |  |      |       |
| 2.                                    |       |      |       | 4.                                  |  |      |       |
| 3.                                    |       |      |       | 5.                                  |  |      |       |
| 4.                                    |       |      |       | 6.                                  |  |      |       |
| 5.                                    |       |      |       | 7.                                  |  |      |       |
| 6.                                    |       |      |       | 8.                                  |  |      |       |
| 7.                                    |       |      |       | 9.                                  |  |      |       |
| 8.                                    |       |      |       | 10.                                 |  |      |       |
| 9.                                    |       |      |       | 11.                                 |  |      |       |
| 10.                                   |       |      |       | 12.                                 |  |      |       |
| 11.                                   |       |      |       | 13.                                 |  |      |       |
| 12.                                   |       |      |       | 14.                                 |  |      |       |
| <b>Coach (Level 1 certified)</b>      |       |      |       | 15.                                 |  |      |       |
| 1.                                    |       |      |       | 16.                                 |  |      |       |
| 2.                                    |       |      |       | 17.                                 |  |      |       |
| 3.                                    |       |      |       | 18.                                 |  |      |       |
| 4.                                    |       |      |       | 19.                                 |  |      |       |
| 5.                                    |       |      |       | 20.                                 |  |      |       |
| 6.                                    |       |      |       | 21.                                 |  |      |       |
| 7.                                    |       |      |       | 22.                                 |  |      |       |
| 8.                                    |       |      |       | 23.                                 |  |      |       |
| 9.                                    |       |      |       | 24.                                 |  |      |       |
| 10.                                   |       |      |       | 25.                                 |  |      |       |
| 11.                                   |       |      |       | 26.                                 |  |      |       |
| 12.                                   |       |      |       | 27.                                 |  |      |       |
| 13.                                   |       |      |       |                                     |  |      |       |

# Certificate of Training / Acknowledgment of Policies

## Certificate of Training

One copy of this form is required for each State Event in which you are registering, i.e. one for Basketball, one for the Fall Classic, one for Summer Games.

Date of Event: \_\_\_\_\_

Sport: Powerlifting

I confirm that the athletes from: \_\_\_\_\_

- Have fulfilled the minimum hours of training for the above sport
- Began training at least 8 (eight) weeks prior to this competition
- Have met all requirements of Special Olympics South Dakota

### Minimum Training Requirements

|              |  |
|--------------|--|
| Bowling      | Bowl a minimum of five (5) 3-game series or a total of 15 games over a minimum of 8 weeks.   |
| Basketball   | A minimum of 15 hours over a minimum of 8 weeks.   |
| Powerlifting | A minimum of 15 hours over a minimum of 8 weeks.   |
| Summer Games | A minimum of 15 hours over a minimum of 8 weeks. The number of hours required would be divided among the number of sports in which you are participating; for example:<br>3 sports - 5 hours per sport / 2 sports - 7.5 hours per sport / 1 sport - 15 hours |
| Equestrian   | A minimum of 15 hours over a minimum of 8 weeks.   |
| Fall Classic | A minimum of 15 hours over a minimum of 8 weeks. The number of hours required would be divided among the number of sports in which you are participating; for example:<br>2 sports - 7.5 hours per sport / 1 sport - 15 hours                                |

## Sports Specific Handbooks

By signing below, I acknowledge I have read and understand the rules of the sport(s) being contested.

## Acknowledgment of Policies

By signing below, I acknowledge I have read, understand, and am abiding by the following policies set forth by Special Olympics South Dakota:

### ***These policies can be found in Section A of the Competition Guide:***

- 15 Passenger Van Use Policy
- Sub Program Request for Merchandise Procedures
- Volunteer Screening Policy
- Athlete Housing Policy
- Insurance Information
- Social Media Policy
- Service Animal Policy
- Concussion Awareness and Safety Recognition Policy
- Coaches Education
- Delegation Financial Accounts & Assets
- Interpreter Policy

\_\_\_\_\_  
Head of Delegation Signature

\_\_\_\_\_  
Date