

**SPECIAL OLYMPICS COLORADO
TENNIS ENTRY FORM**

**Special
Olympics
Colorado**



Region: _____ Day of Contact #: _____

Team/Program: _____

Coach Name(s): _____

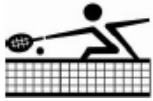
Coach E-mail(s): _____

Do you plan on attending the state competition?	
Yes	No

		COMPETITION	QUALIFICATION SCORE
(Athlete Name)		Level 1 - Skills - 42 ft. court Level 2 - Red Foam Ball - 42 ft. court Level 3 - Orange Ball - 60 ft. court Level 4 - Green Ball (Dot) - full court Level 5 - Yellow Ball - full court	Total Points _____ (Level 1 - Individual Skills)
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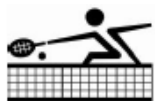
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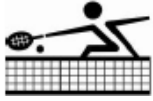
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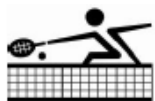
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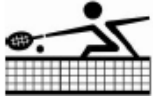
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