

SPECIAL OLYMPICS COLORADO ATHLETICS WC ENTRY FORM

Region: _____ Day of Contact: _____

Team/Program: _____

Coach Name(s): _____

Coach E-mail(s): _____

Do you plan on attending the state competition?	
Yes	No

		10M WC			25M WC			100M WC			400M WC		
		:	.		:	.		:	.		:	.	
(Athlete Name)		min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths
		30M WC Slalom			30M WC Motor Slalom			50M WC Motor Slalom			25M Motor Obstacle Course		
		:	.		:	.		:	.		:	.	
(Gender)		min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths
(DOB)		Circle or Check One											
		Tennis Ball Throw			.								
		Softball Throw			.								
Guide Runner		Shot Put			.								
					m	cm							



		10M WC			25M WC			100M WC			400M WC		
		:	.		:	.		:	.		:	.	
(Athlete Name)		min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths
		30M WC Slalom			30M WC Motor Slalom			50M WC Motor Slalom			25M Motor Obstacle Course		
		:	.		:	.		:	.		:	.	
(Gender)		min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths
(DOB)		Circle or Check One											
		Tennis Ball Throw			.								
		Softball Throw			.								
Guide Runner		Shot Put			.								
					m	cm							

		10M WC			25M WC			100M WC			400M WC		
		:	.		:	.		:	.		:	.	
(Athlete Name)		min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths
		30M WC Slalom			30M WC Motor Slalom			50M WC Motor Slalom			25M Motor Obstacle Course		
		:	.		:	.		:	.		:	.	
(Gender)		min	sec	ths	min	sec	ths	min	sec	ths	min	sec	ths
(DOB)		Circle or Check One											
		Tennis Ball Throw			.								
		Softball Throw			.								
Guide Runner		Shot Put			.								
					m	cm							