



Title: Application for Participation
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In order to be eligible for participation in Special Olympics, every athlete must have a valid Application for Participation (App) on file with the Area or State office. Athletes must have a valid Application for Participation (App) on file with Special Olympics Illinois prior to the start of training.

This App is valid for 2 years from the date of the examination date regardless of the parent/guardian/entrant signature date.

Falsification of this document (App) could result in disciplinary action and possible criminal charges.

Out-of-state Special Olympics Medical Apps will not be accepted for participation with Special Olympics Illinois.

The Application for Participation (App) must be completely filled in; forms with blank sections or attachments (exception: letter from State Office of Guardianship, Department of Children and Family Services, or Christian Science faith, 2a below) will not be accepted.

1. The Athlete Information, Health Insurance, and Emergency Information Sections must be completely filled in. The optional ethnicity information is requested to assist in the organizational outreach efforts. The information in the gray box is strictly voluntary. Med Apps will not be returned if this box is not filled in.
2. The Parent or Legal Guardian must read, sign and date the Parent/Guardian Authorization and Media Release Section. **Faxed signatures of the parent or guardian, verbal consents or phone consents will not be accepted by Special Olympics Illinois.**
 - a. The section must be signed and dated as printed. Deletions or alterations to the section will result in an invalid App. (Exception: deletion of the last paragraph regarding medical treatment and attachment of a letter of explanation and 24-hour emergency telephone numbers from the State Office of Guardianship, Department of Children and Family Services, or letter from a minister of church of Christian Science. **As of January 1, 1987, the letter of explanation must be attached.**)
 - b. Only one of the two signature blocks must be completed. Special Olympics Illinois works under the understanding that this section may be signed by either:
 - The parent (biological or adoptive), unless the athlete has been designated a ward of the state;OR
 - The legal guardian; this person must be legally assigned as guardian for the individual;OR
 - The athlete if he or she is over the age of 18 and has not been designated as needing and having been assigned a legal guardian. A witness signature is necessary if the athlete's signature is unrecognizable (for example, the athlete's signature is an "X").

3. The Medical Clearance section must be completed, signed, and dated by a medical practitioner licensed to administer physicals by the state in which he or she practices. **Faxed signatures of the physician/medical practitioner will not be accepted by Special Olympics Illinois.**

As of September 1, 1990, the Special Olympics Illinois Application for Participation will be the only Medical Clearance form which will be accepted as valid by Special Olympics Illinois.

This person, by signing the Medical Clearance, is stating the athlete is in good health and can safely participate in Special Olympics sports training and competition. It is strongly suggested that the person administering the physical examination possess the following:

- Background and preparation in giving sports physical examinations.
 - Qualifications to administer examinations that would not compromise his or her area of specialty.
4. Send the original copy of the App to the Area Director who will forward the Medical App with the original signatures to the Special Olympics Illinois State office.

Special Olympics Illinois will validate the Medical App. The state office will send a blue copy of the Medical App with an "Approved" stamp back to the Area Director and the Special Olympics Athletic Director (SOAD).

A Medical App will not be validated until all information is correct and completed on the approved form.

Faxed Medical Apps will be considered invalid until the original App is received.

5. Special Olympics Illinois will require that all original Applications for Participation be presented prior to and no later than the established registration deadline of a State championship level event (Winter Games, State Basketball Tournament, Outdoor Sports Festival, Fall Games, Bowling Tournament, and Floor Hockey Tournament). All Apps for the event in question must be valid throughout the completion of that State competition.

Medical Applications must be presented prior to and no later than the established Medical App deadline for Summer Games.

Applications for Participation for athletes participating in District Tournaments and Sectional Tournaments must be received by the established registration deadline and must be valid throughout the completion of that District or Sectional Tournament.

Applications not on file or in receipt by the specified deadline will not be accepted.

An athlete not entered in/scratched from the event may attend the event as a spectator only. He or she will not be allowed to serve as an official member of their team's delegation, therefore, housing and meals will be the individual's responsibility.

EXAMPLE: John is scratched from Winter Games. John attends the event. John may not assume the room space, or meals, he would have had if he had remained an official member of his team's delegation. Therefore, John must make other housing and meal arrangements.

6. **Effective 1-1-11** the only Application for Participation that will be accepted will be the revised form dated 4/1/08 or 8/1/10.
7. The Agency Head Coach will be required to check athlete's Medical Applications for completeness, checking the Parent/Guardian Date and the Doctor's date for the expiration of the Application for Participation. Failure to have a valid Medical at the time of the registration deadline will result in the athlete being denied participation in a competition.
8. An individual who participates in the Unified Sports program as a Unified Sports partner must complete and sign the Unified Sports Partner Application for Participation in Special Olympics Form. The Unified Sports Partner App will be maintained by the Special Olympics Illinois State Office. The submission and validation deadlines and processes for the Unified Sports Partners Application for Participation Form will follow the same guidelines as those established for the Athlete Application for Participation. A Unified Partner must also have a Class A form on file with Special Olympics Illinois.