GOLF - Alternate Shot Team Play 9 Hole ACTIVE ATHLETES

	TEAM NAME					REGION					
1. 2.	ISTRUCTIONS: A team shall consist of one athlete For Special Olympics athlete golfe Special Olympics athlete an oppor guidance of a Unified partner whos athlete. As a result, this scenario d expected to be of similar ability. Th becomes self-sufficient on the golf Partners should <u>NOT</u> be listed o Each team shall register by submit must be accompanied by the par for	ers with an entry level of understan tunity to transition from individual se ability and knowledge of golf is n oes not function in the traditional l ne Unified partner serves as a coar course. In coaches form. tting the most recent six scores un	ding of golf, this le skills to individual more advanced th Unified Sports mo ch and mentor so	evel is des play and an that of del where that the S	signed to g to progres the Speci teammat pecial Oly	give the ss under the al Olympics es are mpics athlete		Spe Diyn New	pi	CS	
ACTIVE ATHLETES			BIRTHDATE MM/DD/YYYY	GENDER ATHLETE			Scores Each team shall register by submitting the				
1	Last Name	First Name		Μ	F	PARTNER ATHLETE PARTNER	Team Scores Par	ent six scores	and the	couse par	
2	2					ATHLETE	Team Scores Par				
3						ATHLETE	Team Scores Par				
4						ATHLETE PARTNER	Team Scores Par				

If a person identifies as Non-Binary, please leave the gender field blank.



GOLF - Alternate Shot Team Play 9 Hole ALTERNATE ATHLETES

	TEAM NAME					REGION							
1. 2. 3. 4.	STRUCTIONS: A team shall consist of one athlete For Special Olympics athlete golfe Special Olympics athlete an oppor guidance of a Unified partner whos athlete. As a result, this scenario d expected to be of similar ability. Th becomes self-sufficient on the golf Partners should <u>NOT</u> be listed o Each team shall register by submit accompanied by the par for the cou	rs with an entry level of understand tunity to transition from individual s se ability and knowledge of golf is n loes not function in the traditional L ne Unified partner serves as a coac course. n coaches form. ting the most recent six scores und	ling of golf, this le skills to individual nore advanced th Jnified Sports mo h and mentor so	evel is des l play and han that of odel where that the S	signed to g to progres the Speci teammat pecial Oly	ive the ss under the al Olympics es are mpics athlete			_	np			
				IDER	ATHLETE		am shall	-	er by s		-		
-	Last Name	First Name		Μ	F	PARTNER	most re Team	cent six	scores	s and th	ie couse	e par	
1						ATHLETE	Scores						
						PARTNER	Par						
						ATHLETE	Team Scores						
2						PARTNER	Par						
							Team						
3						ATHLETE	Scores						
						PARTNER	Par						
							Team						
4						ATHLETE	Scores						
L						PARTNER	Par						

If a person identifies as Non-Binary, please leave the gender field blank.



GOLF - Alternate Shot Team Play 9 Hole COACH FORM

		IN	STRUCTIONS					
	All coaches within your quo Alternate coaches are activ		baches are unable to attend games.					
			des coaches, agency staff, one-on-o		erones,	etc.		
	TEAM NAME		RE	GION				
ACTIVE COACHES			DATE OF BIRTH	GEN	IDER	Certification Current?		
#	Last Name	First Name	(Month/Date/Year)	М	F	Yes	No	
1								
2								
3								
4								
5								
ALTERNATE COACHES								
	ALTERNATE	COACHES		GEN	IDER	Certifi Curr	cation ent?	
#	ALTERNATE Last Name	COACHES First Name	DATE OF BIRTH (Month/Date/Year)	GEN M	IDER F			
#						Curr	ent?	
# 1 2						Curr	ent?	
1						Curr	ent?	
1		First Name	(Month/Date/Year)	M		Curr Yes Certifi	rent? No	
1	Last Name	First Name	(Month/Date/Year)	M	F	Curr Yes Certifi	rent? No	
1 2 3	Last Name AGENCY STAFF, 1:1,	First Name CHAPERONES, ETC.	(Month/Date/Year)	GEN	F	Curr Yes Certific Curr	rent? No cation rent?	
1 2 3	Last Name AGENCY STAFF, 1:1,	First Name CHAPERONES, ETC.	(Month/Date/Year)	GEN	F	Curr Yes Certific Curr	rent? No cation rent?	
1 2 3 #	Last Name AGENCY STAFF, 1:1,	First Name CHAPERONES, ETC.	(Month/Date/Year)	GEN	F	Curr Yes Certific Curr	rent? No cation rent?	
1 2 3 # 1 2	Last Name AGENCY STAFF, 1:1,	First Name CHAPERONES, ETC.	(Month/Date/Year)	GEN	F	Curr Yes Certific Curr	rent? No cation rent?	

Special Olympics New York



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