Special Olympics New Yor	k   Training Club Rost	er		
Team Information				
Region:			Accepting New Athletes:	
Team Name:			Ages Served:	
Sport: Year:			Accepting New Coaches: Season:	
Training Information				
Training Start Date (MM/DD/YYYY):			Training Facility:	
Training End Date (MM/DD/YYYY): Training Day(s):			Address: City:	
Training Start Time (XX:XX PM)			Zip (XXXXX):	
Coach Information			,	
1:3). All coaches and volunteers must be S Powerlifting and Alpine Skiing coaches are	pecial Olympics New York certified, required to obtain a sport-specific	with at least one coach training). Accounts for r	per team obtaining a sport-specific to new or existing coach certifications ca	per (4) individual sport athletes (except Athletics - aining (All Aquatics, Gymnastics, Equestrian, n be created, managed and updated online at:
(https://sonylive.nyso.org/pages/app/CLA Last Name	First Name	Date of Birth	Gender	Role
participation. Teams are required to keep a dig	registration packet (including ath regist ital or paper copy for all participating at	thletes. Unified Partners m	ust complete the Unified Partner Registra	
Last Name	First Name	Date of Birth	Gender	Role