



Dear Special Olympian,

Please print clearly and fill out all forms entirely. This packet is required for all Special Olympic sports you participate in with us and is good for **three years** from the date the doctor signs the physical.

Enclosed you will find:

Two forms required by Stark DD:

- **Personal Information Page** – please fill it out completely so we have your contact information and information that will help us to better understand your needs.
- **Athlete Code of Conduct**- please sign this page acknowledging that you have read and understand our expectations of participation.

Four pages required by Special Olympics Ohio:

- **Athlete Medical History** (two pages) please print clearly!
- **Athlete Medical Form-Physical Examination** This form must be completed and signed by a licensed physician.
- **Athlete Release Form**- Must be signed by athlete and parent/guardian.

ALL of the above FORMS must be **completed** and turned in before you are able to participate in practices and/or events.

Forms can be returned to the Special Olympic Coordinator at 2950 Whipple Ave NW Canton, Ohio 44708 or given to the coach of your particular sport.

Also enclosed for your convenience is the **Alert Now** form. This form will allow you to receive all Stark DD Special Olympic information by text, voicemail, or email. By filling out and submitting this form you will continue to receive all Special Olympic notices until you call and ask us to stop sending them. This form is NOT required for participation.

We look forward to your participation in our Special Olympics programs. Please call (330) 479-3750 if you have any questions or concerns.

Sincerely,

Paula Gardner
Special Olympic Coordinator