

CONNECTICUT INTERSCHOLASTIC ATHLETIC CONFERENCE
 30 Realty Drive, Cheshire, Connecticut 06410
 Telephone (203) 250-1111 / Fax (203) 250-1345

Name of School _____ Telephone (_____) _____
 Address _____ Zip Code _____
 Name of Coach/Advisor _____ Home Telephone (_____) _____

ELEMENTARY UNIFIED SPORTS™ DAY
G Saturday, April 11, 2009 – Glastonbury High School
G Saturday, May 2, 2009 – Conard High School, West Hartford
G Saturday, May 9, 2009 – New Haven Fieldhouse

Please list below all participating students. Please indicate "SA" after the name for Special Athlete, or "SP" for Special Partner. Please list uniform number for all participating students. PLEASE PRINT CLEARLY.

* GRADES K - 3		GRADES 4 - 5	
Name	SA/SP	Name	SA/SP
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

* Please list by grade level so any age group data can be collected.
 ** **MEDICAL FORMS ARE DUE PRIOR TO PARTICIPATION**

List team's practice schedule – day(s) _____ Dates _____

I certify that the above listed special athletes are eligible for participation in Unified Sports™ in that they have satisfied any one of the following requirements as having intellectual disabilities: 1) The person has been identified by an agency or professional as having intellectual disabilities as determined by their localities; or 2) The person has a cognitive delay, as determined by standardized measures such as intelligent quotient or "IQ" testing or other measures which are generally accepted within the professional community in the Accredited Program's nation as being a reliable measurement of the existence of a cognitive delay; or 3) The person has a closely related developmental disability. A "closely related developmental disability" means having functional limitations in both general learning (such as IQ) and in adaptive skills (such as recreation, work, independent living, self-direction, or self care). However, persons whose functional limitations are based solely on a physical, behavioral, or emotional disability, or a specific learning or sensory disability, are not eligible to participate as Special Olympics athletes, but may be eligible for Unified Sports™

Signature of Principal _____ Date _____