

# North Central Regional Spring Game Information 2019

## **Athletics:**

Saturday, April 20, 2019 9:00 a.m. – 4:00 p.m.  
Shawnee Heights High School  
4201 SE Shawnee Heights Rd  
Tecumseh, KS 66542

## **Swimming:**

Sunday, April 28, 2019 2:00 p.m. – 4:00 p.m.  
Kansas State University Natatorium  
K-State Campus @ Denison and Hunting  
Manhattan, KS 66506

**Track deadline: Monday, April 8, 2019**  
**Swim deadline: Monday, April 22, 2019**

RETURN ALL REGISTRATION FORMS TO:  
SOKS – North Central Region

**MAIL TO: Krystin Guggisberg      OR EMAIL TO: [guggisbergk@kssso.org](mailto:guggisbergk@kssso.org)**  
**P.O. Box 145                              OR FAX TO: 913-236-9771**  
**Manhattan, KS 66505**

Please be sure all of your athletes have updated physicals!  
These need to be sent to SOKS Headquarters:  
5280 Foxridge Drive, Mission, KS 66202  
Attn: Linda Hunt  
Fax: 913-236-9771

**All packet information will be posted on the  
website at [www.kssso.org/north-central](http://www.kssso.org/north-central)**

## Competition Specific Information:

### **TRACK: Saturday, April 20**

The make-up date in case of rain is Saturday, April 27.

#### Staging:

- Staging locations for all running events are included on the schedule.
- Throwing events will take place in the throwing pits south of the track.
- Jumping events take place in the pits on the east side of the track.
- Wheelchair events take place in the south end of the parking lot on the west side of the stadium, which will be roped off with caution tape.

#### Check In:

- Please have all athletes check-in at staging for their event 5 minutes before the posted start time. This will give us time to stage them and ensure they do not miss the event.
- Field events are **NOT** come and go. Your athletes should be at their field events at the posted time. The only exception will be if the athlete is waiting at staging for a running event. If they have completed the running event and are waiting for medals, please send them on to their field event instead.

#### Medals:

- Medals will be awarded immediately following each event. Two medals tents will be set up: one for track events and one for field events. Heats should go together from their event to awards, to all be awarded as one.
- The Topeka Police Department will be on hand throughout the day handing out medals at awards tents.

#### Food:

- Lunch will again be Chick-fil-A chicken sandwiches, chips and a cookie. Water will also be provided with lunch. Lunches will be packed and handed up BY TEAM (not come and go) and will only be provided for athletes and coaches with current certifications and/or physicals on file.
- There will be a concession stand run by SHHS available throughout the day.

### **SWIMMING: Sunday, April 28**

#### General:

- All awards will be given out by team at the conclusion of the swim meet.
- Swimmers can choose to start their events from inside the pool or from the blocks.

## **SPRING/SUMMER GAMES REGISTRATION PROCEDURES**

This form does NOT need to be sent in with the packet. It is to be used as a guideline to help ensure that you have all the material required to file a complete registration.

### **THE FOLLOWING FORMS SHOULD BE INCLUDED IN THE REGISTRATION PACKET SENT TO THE REGIONAL DIRECTOR. DO NOT SEND PACKET TO THE STATE HEADQUARTERS.**

1. \_\_\_\_\_ Enclose Master Roster, listing athletes in ALPHABETICAL order.  
Complete all information requested at the top of the form, making certain that you fill in gender & birth date for each athlete. Designate the event(s) in which the athlete is competing by entering the appropriate event entry code and the time/distance columns on the event information portion of the form. (These forms are included as an attachment to the "Spring Gams" email.)  
**TIMES/DISTANCES FOR EACH EVENT must be included!**
2. \_\_\_\_\_ Complete the Meals Form – Spring Games only (Pg. 6)
3. \_\_\_\_\_ Complete the Ratio Policy Form & submit it along with Master Roster. If an exception is needed, please write details on the form. (Pg. 7)
4. \_\_\_\_\_ Relay Entry Form (if applicable)– 1 per relay team (Swimming & Athletics) **INCLUDE A RELAY ENTRY TIME.** (Pg. 8)
5. \_\_\_\_\_ Special Olympics Kansas Medical Release form (yellow copy) for ALL athletes **MUST** be in the coach's possession at all times. White copy **MUST** be sent to the SOKS Headquarters Office prior to registration.

**Remember to submit the above forms by Monday, April 8!**

## EVENT ENTRY CODES

For entering your athletes in athletics and swimming: put code and correct time/distance on the master roster. **THESE ARE THE ONLY EVENTS OFFERED. PLEASE DO NOT SIGN ATHLETES UP FOR EVENTS NOT LISTED. Thank you!**

### ATHLETICS

AT050M	50m Race
AT100M	100m Race
AT200M	200m Race
AT400M	400m Race
AT800M	800m Race
AT1500	1500M Race
AT100W	100m Race Walk
AT200W	200m Race Walk
AT400W	400m Race Walk
AT25WH	25m Manual Wheelchair Race
AT25WM	25m Motorized Wheelchair Race
AT1CWH	100m Manual Wheelchair Race
AT1CWM	100m Motorized Wheelchair Race
AT30WH	30m Manual Wheelchair Slalom
AT30MS	30m Motorized Wheelchair Slalom
AT25OR	25m Manual Wheelchair Obstacle
ATMWOR	25m Motorized Wheelchair Obstacle Race
AT50MN	50m Manual Wheelchair Slalom
AT50MS	50m Motorized Wheelchair Slalom
ATSTLJ	Standing Long Jump (cannot compete in RLJ)
ATLNJP	Running Long Jump (cannot compete in SLJ)
ATSP1M	Shot Put - Men - 4kg/8.13lbs
ATSP2W	Women - 2.72kg/6lbs
ATSOBT	Softball Throw
ATTJAV	Turbo Javelin
AT4X1R	4 x 100m Relay
*AT10RW	10m Race Walk
*AT10AW	10m Assisted Race Walk
*AT025M	25m Run
*AT25MW	25m Race Walk
*AT050MW	50m Walk
*AT25AW	25m Assisted Race Walk
*AT10WH	10m Manual Wheelchair Event
*AT10WM	10m Motorized Wheelchair Event
*ATTBTD	Tennis Ball Throw for Distance -

**(Athletes with entry scores longer than 15 meters will be placed in the softball throw.)**

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### SWIMMING

AQ25MF	25m Freestyle
AQ50MF	50m Freestyle
AQ1CMF	100m Freestyle
AQ25BK	25m Backstroke
AQ50BK	50m Backstroke
AQ25BS	25m Breaststroke
AQ50BS	50m Breaststroke
AQ25BF	25m Butterfly
AQ50BF	50m Butterfly
AQ1CIM	100m Individual Medley
AQ1CFR	4 x 25m Freestyle Relay (Junior)
AQ1CFR	4 x 25m Freestyle Relay (Senior)
AQ1CFR	4 x 25m Freestyle Relay (Masters)
AQ1CMR	4 x 25m Medley Relay (Junior)
AQ1CMR	4 x 25m Medley Relay (Senior)
AQ1CMR	4 x 25m Medley Relay (Masters)
*AQ10AW	10m Assisted Walk
*AQ20AW	20m Assisted Walk
*AQ15WK	15m Walk
*AQ25WK	25m Walk
*AQ15FL	15m Flotation Race
*AQ25FL	25m Flotation Race
*AQ10AS	10m Assisted Swim
*AQ10US	10m Unassisted Swim
*AQ20AS	20m Assisted Swim
*AQ20US	20m Unassisted Swim

**\*Starred events are for lower functioning athletes. Athletes cannot cross over between low motor and non low motor running/racing events. (In other words, athletes can only compete in running/racing events that have a star by them OR events that do not have a star beside them.) Wheelchair athletes and athletes participating in the Tennis Ball Throw (under 15 meters) are exempt from this policy. Please contact your Regional Director if you have any questions.**

# **MEALS FORM**

Special Olympics Team: \_\_\_\_\_

Athletes # of meals \_\_\_\_\_

Coaches # of meals \_\_\_\_\_

Total # of meals \_\_\_\_\_

# RATIO POLICY

**\*\*This form must be turned in with your Master Roster\*\***

Coaches must select each athlete's events and stay within the guidelines of the Athlete Maximum Ratio Policy:

<u>Number of Athletes on Team</u>	<u>Maximum per Event</u>
1-10 athletes	3 athletes per event
11-25 athletes	6 athletes per event
26-50 athletes	10 athletes per event
51-75 athletes	16 athletes per event
75-100 athletes	22 athletes per event
101+ athletes	30 athletes per event

Number of athletes competing in Athletics: \_\_\_\_\_

**Include below how many athletes you have entered into each event:**

50	100	100 RW	200	200 RW	400	400 RW	800	1500	RLJ	SLJ	SP	SBT	JAV

*Low motor events are exempt from this policy.*

*Speak with me if there are circumstances that your local program would need an exception to this policy.*

# RELAY TEAM FORM

Team Name \_\_\_\_\_

Head Coach \_\_\_\_\_

**Circle which relay:**

**AQUATICS**

Aquatics (4x25 Free Relay)

Aquatics (4x25 Medley)

**ATHLETICS**

Track & Field (4x100 relay)

Manual Wheel Chair Relay

Motorized Wheel Chair Relay

**Circle appropriate age group:**

Junior 8-15

Senior 16-21

Master 22 and over

This form is to be used for both swimming and athletics relays. Please complete one form for each relay team and mark both the event and age division.

***Co-ed teams will compete in the Male division. Age of oldest athlete determines division.***

Office Use only	Last Name	First Name	Age	Gender
1.				
2.				
3.				
4.				
Alt. 1				
Alt. 2				

Relay Time: \_\_\_\_\_

**NOTE:** Only athletes from the same team/school/organization may compete as a Relay Team. Athletes from different teams/schools/organization may not be entered in the same Relay Team. Each relay team will be allowed 2 alternates. An athlete cannot be a member of one relay and an alternate on another. An athlete may be an alternate on more than one relay.