SPECIAL OLYMPICS NEW YORK

Capital District Summer Super Regional

**Sunday, May 5th, 2024**

**LOCATION:** Shenendehowa Central Schools

970 Route 146, Clifton Park, NY 12065

**SPORTS:**

* + - * + Basketball Team
        + Basketball Skills (Site tbd- potentially at Shen HS West)
        + Gymnastics (off-site🡪 World Class Gymnastics: Latham, NY)
        + Swimming
        + Tennis

**REGISTRATION:** **ATTENTION CAPITAL REGION TRAINING CLUBS:**

For Eligibility for this event, an up-to-date roster must be submitted before the registration deadline!

* Delegation Information Sheet
* Athlete and Coaches Registration Forms (include alternates, staff and drivers)
* **IF you are competing in the track event/time trials on 4/23, pleas**

The above forms may be **mailed, faxed** or **emailed** to:

**Erik Kromer Fax:** 518-930-4884 **E-Mail:** [**ekromer@nyso.org**](mailto:ekromer@nyso.org)

**Friday, April 12th, 2024**

Deadline

Please be sure to register alternates, as additional athletes will not be able to be added after the registration deadline.

**Please Note: ALL coaches must travel with their medical & consent forms, along with COVID documentation for this event.**

**AREAS/REGIONS:** All regions and areas are invited to participate. Preference is given to Capital District and North Country Region Training Clubs.

**AWARDS:** Medals awarded for Gold, Silver and Bronze; ribbons for 4th - 8th place

**ALTERNATES:** An athlete or coach can only be replaced by an athlete or coach that has been **pre-registered**.

**ATTIRE:** Athletes must be dressed in team attire and adhere to all rules. Athletes Wearing Jeans, of any color, will not compete.

**MEALS:** **Meals will not be offered at this event. Concessions stands at track TBD.**

**HOUSING:** **Housing Registration must be discussed with your Regional Staff**

**DIRECTIONS:** Take I-87 to exit 9 (Clifton Park), head west on Route 146. Continue approximately 1 ½ miles to the traffic light at the entrance of the Shenendehowa campus. Follow signage on campus to different sites.

**TOBACCO POLICY:** Special Olympics New York has been designated ***Tobacco Free.*** Smoking and use of other tobacco products (such as snuff and chew) will not be permitted at any Special Olympics training or competition.

***The Shenendehowa Campus is a Tobacco Free Area.***

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**Sunday, May 5th, 2024**

**TENTATIVE EVENT SCHEDULE**

*(Subject to change)*

## Sunday, May 5th, 2024: Shenendehowa Central Schools

8:00 – 9:00 am Arrival/Registration

Volunteer Registration

**On-Site Delegation Registration**

Please arrive with the athletes dressed in competition attire.

Athletes should be dressed and prepared to participate in an **outdoor opening ceremony**.

The following steps will be completed at on-site registration:

* Attendance and Event Entry Confirmation
* Checking of Medical/Consent forms- ALL coaches MUST have medicals with them at all times
* Checking of COVID documentation for Athletes AND Coaches
* Athlete numbers and nametags
* Handouts (coaches, manuals, updated schedules, etc.)

8:00-12:00pm Healthy Athletes/Performance Stations

9:15 - 9:45 am Opening Ceremonies

10:00 - 4:00 pm Basketball and Tennis Competition Begins

11:00am Basketball Skills, Gymnastics, and Swimming Competitions Begin

***Awards to follow each competition at designated site***

4:00 pm Departure

###### **2024 Capital District Summer Super Regional**

**Team Information Sheet**

**(Please print or type)**

Name of Person Completing Form:

Training Club Name:

County: Region/Area:

Head Coach of Training Club:

Day of Event Phone #:

Email:

Number of Athletes: \_\_\_\_\_\_\_\_\_\_\_\_ Number of Coaches: \_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Additional Agency Staff: \_\_\_\_\_\_\_\_\_\_\_\_ Number of Drivers: \_\_\_\_\_\_\_\_\_\_\_\_

**Total Head Count for Team**: \_\_\_\_\_\_\_\_\_\_\_\_

**Opening Ceremonies Participation**

Please name one individual to hold your team sign for Opening Ceremonies:

Please name one Athlete from your club able to participate in the torch exchange, if selected:

Please name one individual able to perform the Athlete Oath, if selected:

Please name any persons capable of singing the National Anthem:

**Out of Region Teams**

Scheduled Arrival Day & Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_