



Special Olympics
New Jersey

TO: 08-09 Local Training Programs (LTP's) **CC:** Area Directors
FROM: Special Olympics New Jersey **Program Staff**
DATE: July 2009
RE: LTP Registration / 2009-10 Program Year

NOTE: All forms can be found on our Website in the Locker Room section.

****If your group plans to participate this program year you must return the initial LTP Registration Forms Part (A & B) ASAP. If they are not returned to the Chapter Office, your program will not receive information regarding upcoming competitions!****

Part A

- ◆ **Use a pen. Print firmly and neatly**, writing on the top sheet only. Please keep the last copy (pink) of the registration form.
- ◆ A permanent mailing address must be used as your address where you are able to receive information year-round. You must notify us of any changes, if they occur, to prevent delays in your receiving information from us.
- ◆ Provide your e-mail address (**only if it is used regularly; at least weekly**). **Check if you would prefer to receive communications ONLY via e-mail.**
- ◆ Number of athletes **training**, by age group, by gender is needed for the SOI athlete census.
- ◆ Check the box in the "Athletes Competing" section only if your athletes plan to **compete** at Area or Chapter level in their sport.

Part B

- ◆ List all coaches and assistant coaches in your program by sport, include their U.S. postal mail and e-mail addresses. Make a copy of this sheet for your records.

Team Response Form

- ◆ Please complete the enclosed Team Response Form if your program will be participating in League Competition. League information will be sent directly to the Head Coach for each sport, unless otherwise indicated. If your program will be participating in a Fall League, please complete and return the appropriate registration forms.

General

- ◆ The LTP Coordinator, **is responsible** for distributing materials to the coaches **and** for the return of competition Registration Forms.
- ◆ Once the initial LTP Registration Form is processed by the Chapter Office, you will receive a set of Quota Request Packets for the entire program year.
- ◆ Each **Quota Request Form must be returned** to the Chapter Office **by the deadline date** indicated on each form. The Chapter Office will process each Season's Quota Request Form, then you will be registered for that particular season's sectional or chapter competitions. Only those programs that return the Quota Form will receive registration materials for the sectional and chapter events.
- ◆ **Return** the 1st and 2nd copies Form A (white & yellow) and both sides of Form B to:

RETURN AS SOON AS POSSIBLE!!!

LTP Registration
Special Olympics New Jersey
3 Princess Road
Lawrenceville, NJ 08648