



## 2020-21 Virtual Program Intent Declaration Package

**This Program is intended for the following participants:**

- **2 – 7-years old (in the Young Athletes Program)**
- **8-years old and above**
- **Athletes (Individuals with intellectual disabilities)**
- **Partners (Individuals without intellectual disabilities)**
- **Unified Champion Schools (UCS). UCS must pair one athlete and one partner to work together virtually in their designated sport. *The score of the athlete and partner will be combined when added to team score.***

**PROGRAM NAME:**

### **Instructions for completing the Program Intent Declaration Form**

1. List all athletes in alphabetical order. Last name should be placed in the first box provided.
2. Complete all boxes to the right of each individual name listed on the form.
3. Please note that any individual participating in this program must meet the following criteria:
  - Be listed on the original intent declaration form with classification, shirt size, gender and DOB. (Please fill out completely before turning in!)
  - Have a signed Athlete Medical or Unified Partner Form with parental signature.

## 2020-21 Virtual Program Intent Declaration Package

**Directions:** Alphabetically list the names of all athletes that you intend to involve in both Unified and Traditional Sport.

PROGRAM <span style="border: 1px solid black; display: inline-block; width: 300px; height: 25px; vertical-align: middle;"></span>						Youth Only			Adult Only			
						Pick 1	Age 2-7	Pick 1 or both				
LAST NAME	FIRST NAME	Wheelchair Y/N	Intellectually Disabled- Y/N	SHIRT SIZE	GENDER M or F	Date of Birth MM/DD/YR	Basketball	Soccer	FIT-5	YAP Age 2-7 Only	Stride Fitness	Adult Individual Basketball
1.												
2.												
3.												
4.												
5.												
6.												
7.												
8.												
9.												
10.												
11.												
12.												

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**Directions:** Alphabetically list the names of all athletes that you intend to involve in both Unified and Traditional Sport.

PROGRAM <span style="border: 1px solid black; display: inline-block; width: 300px; height: 20px; vertical-align: middle;"></span>							Youth Only			Adult Only		
							Pick 1	Age 2-7	Pick 1 or both			
LAST NAME	FIRST NAME	Wheelchair Y/N	Intellectually Disabled- Y/N	SHIRT SIZE	GENDER M or F	Date of Birth MM/DD/YR	Basketball	Soccer	FIT 5	YAP Age 2-7 Only	Stride Fitness	Adult Individual Basketball
13.												
14.												
15.												
16.												
17.												
18.												
19.												
20.												
21.												
22.												
23.												
24.												



## 2020-21 Virtual Program Intent Declaration Package

**PROGRAM NAME:**

This form should be filled out using the information from the **20-21 Virtual Program Intent Declaration Package**. The information provided below helps SODC:

- ❖ Order/prepare the appropriate amount of equipment.
- ❖ Determine estimated number of commemorative participation shirts to order.
- ❖ Schedule individual practices with volunteers and coaches

### Program Participation Summary

Only pick one in the section	Sport	# of athletes	# of partners	# of wheel chair participants	# of Coaches	# of equipment packages needed
Section 1	Basketball					
Section 1	Soccer					
Section 1	Fit 5					
Section 2	YAP					
Section 3	Adult Individual Basketball					
Section 3	Adult Stride Fitness					