

# EKS GAMES GOLF UNIFIED TEAM ENTRY FORM

Due **IN HOUSE** to the State Office by **Tuesday, September 1, 2020.**

Copy form as needed.

Special Olympics Indiana; 6200 Technology Center Drive, Suite 105; Indianapolis, IN 46278,  
Email: [entries@soindiana.org](mailto:entries@soindiana.org)



**Special  
Olympics  
Indiana**



## FOR TEAMS NOT PARTICIPATING IN UNIFIED GOLF TOUR.

### GENERAL INFORMATION

PROGRAM NAME: \_\_\_\_\_ AREA: \_\_\_\_\_

### UNIFIED SPORTS® TEAM ENTRY

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

GENDER:  MALE  FEMALE TYPE:  ATHLETE  PARTNER

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

GENDER:  MALE  FEMALE TYPE:  ATHLETE  PARTNER

DOES THIS UNIFIED TEAM PLAN TO ADVANCE TO THE STATE CHAMPIONSHIPS, IF THEY QUALIFY?  YES  NO

### UNIFIED TEAM COMPETITION

ROUND	DATE	9-HOLE SCORE (PLAYING ALTERNATE SHOT)	GOLF COURSE	COURSE SLOPE
1				
2				
3				
4				
5				
6				
<b>ROUND AVERAGE</b>				

### UNIFIED SPORTS® TEAM ENTRY

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

GENDER:  MALE  FEMALE TYPE:  ATHLETE  PARTNER

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

GENDER:  MALE  FEMALE TYPE:  ATHLETE  PARTNER

DOES THIS UNIFIED TEAM PLAN TO ADVANCE TO THE STATE CHAMPIONSHIPS, IF THEY QUALIFY?  YES  NO

### UNIFIED TEAM COMPETITION

ROUND	DATE	9-HOLE SCORE (PLAYING ALTERNATE SHOT)	GOLF COURSE	COURSE SLOPE
1				
2				
3				
4				
5				
6				
<b>ROUND AVERAGE</b>				

**CONFIDENTIALITY NOTICE**

This communication is for the sole use of the intended recipient(s) and may contain information that is confidential, privileged, or otherwise exempt from disclosure under applicable law. If you are not the intended recipient(s), the dissemination, distribution, or copying of this message is strictly prohibited. If you have received this communication in error, please contact the sender immediately and destroy all copies of the original message and any attachments. Receipt by anyone other than the named recipient(s) does not constitute a waiver of any applicable privilege.