

MEGA DIP REGISTRATION FORM

Thank you for participating in the Dip! If you are not registering online, please complete this form and send to specialolympics@sonh.org.

PERSONAL INFORMATION

Name _____ Date of Birth _____

Email Address _____ ☐ Home ☐ Work

Phone Number _____ ☐ Home ☐ Cell ☐ Work

Address _____ ☐ Home ☐ Work

City _____ State _____ Zip _____

Gender ☐ Male ☐ Female ☐ Other

DIP INFORMATION

I am a: ☐ Dipper ☐ Sunbathing Bear ☐ DIY Dip

Team name _____ Team Captain's name _____

ADDITIONAL INFORMATION

Which of the following best describes you?

- ☐ American Indian/Alaska Native ☐ Black or African American ☐ White or Caucasian ☐ Asian American
- ☐ Native Hawaiian or Other Pacific Islander ☐ Hispanic or Latinx ☐ Prefer not to answer
- ☐ More than one race