

RE-REGISTRATION PACKAGE FOR RETURNING VOLUNTEERS

Volunteers with Victoria Special Olympics **MUST RE-REGISTER EVERY YEAR**. This is **MANDATORY** for insurance and other administrative reasons.

If you are a **new volunteer** or you **were not registered** as a Victoria Special Olympics volunteer last year, do not complete this package. Instead, you should complete the [New Volunteer Registration Package](http://www.victoriaspecialolympics.com/docs/new_volunteer.pdf) available at http://www.victoriaspecialolympics.com/docs/new_volunteer.pdf.

RETURNING VOLUNTEERS

If you are completing the forms electronically:

Step 1: Complete the following **two** forms:

1. Victoria Registration Form (Special Olympics BC – Victoria: Volunteer Registration)
2. BC Special Olympics Volunteer Code of Conduct

Step 2: Save the completed forms and email the saved package to the Volunteer Registrar at: volunteerregistrar@gmail.com

If you are completing a hard copy version of the forms:

Step 1: Complete the following **two** forms:

1. Victoria Registration Form (Special Olympics BC – Victoria: Volunteer Registration)
2. BC Special Olympics Volunteer Code of Conduct

Step 2: Send completed forms to the Volunteer Registrar at:

Confidential Fax #: 250-472-8171 (no cover sheet needed) **OR**

Scan and email to: volunteerregistrar@gmail.com **OR**

Mail to: Special Olympics Volunteer Registrar
355 Hector Road, RR#3
Victoria BC V9E 2C3

SPECIAL OLYMPICS BC – VICTORIA RETURNING VOLUNTEER RE-REGISTRATION – PROGRAM YEAR: 2017-18

This re-registration form is for volunteers who were registered in 2016-17. New volunteers and those who were not registered in 2016-17 must complete the [New Volunteer Registration Package](http://www.victoriaspecialolympics.com/docs/new_volunteer.pdf) (http://www.victoriaspecialolympics.com/docs/new_volunteer.pdf)

Date: _____

First Name: _____ Last Name: _____ Gender: _____

Address: _____ City: _____ Prov: BC

Postal Code: _____ Email: _____ Home Tel: _____

Cell: _____ Fax: _____ Work Tel: _____
(provide only if you may be contacted at work)

National Coaching Certification Program (NCCP) #: _____

Volunteer Interests

Local Committee: (Executive and sub-committees) **Special Events:** (e.g. tournaments, car wash, etc.)

Sport Manager: (Assisting head coach with administrative tasks and coaching)

Coaching: you may select up to 2 sports for EACH session – please number by preference, e.g. Curling: 1 Swimming: 2

All sports are for ages 12 and over except Active Start (ages 2 to 6) and FUNdamentals (ages 7 to 11)

Fall Session

Spring Session

Athletic Club: <input type="checkbox"/> Wed	5 Pin Bowling: <input type="checkbox"/> Tue	Speed Skating: <input type="checkbox"/> Tu/Th	Bocce: <input type="checkbox"/> Tue	Softball: <input type="checkbox"/> Tue
Basketball: <input type="checkbox"/> Mon	Floor Hockey: <input type="checkbox"/> Mon	Swimming: <input type="checkbox"/> Thu	Golf: <input type="checkbox"/> Wed	T-Ball: <input type="checkbox"/> Wed
Curling: <input type="checkbox"/> Thu	FUNdamentals: <input type="checkbox"/> Tue	10 Pin Bowling: <input type="checkbox"/> Wed	FUNdamentals: <input type="checkbox"/> Tue	Track/Field: <input type="checkbox"/> Mon
Figure Skating: <input type="checkbox"/> Sat	Rhythmic Gymnastics: <input type="checkbox"/> Mon		Soccer: <input type="checkbox"/> Thu	
Club Fit – Performance: <input type="checkbox"/> Wed			Club Fit – Performance: <input type="checkbox"/> Wed	

Emergency Contact

Name: _____ Relationship: _____

Daytime Tel: _____ Evening Tel: _____

Medical Information

Medical Card #: _____ Dr. Name: _____ Dr. Tel: _____

Tetanus shot year: _____ Glasses: Contacts: Dentures: Hearing Aid: Asthma:

Heart Cond: Allergies: List allergies: _____

Diabetes: Diabetes treatment: _____

Medications: Name and Dose: _____ Dose Frequency: _____

Name and Dose: _____ Dose Frequency: _____



BC Special Olympics Volunteer Code of Conduct

BC Special Olympics volunteers make it possible for athletes to benefit from quality sport training and challenging sport competition in a safe and positive environment. As a volunteer, you accomplish this by allowing the athletes the opportunity to interact with caring individuals, observe mature behaviour, and learn responsibility from your positive example. As a volunteer, you are expected to:

Fulfill the Responsibilities and Expectations of your Assignment:

- carry out all aspects of your assignment
- take the initiative to become aware of the responsibilities of your assigned position
- follow the policies and procedures of BC Special Olympics
- do not bring pets or children to the sport as they distract the athletes and may prevent you from focusing on your coaching responsibilities

Set an Example for the Athletes:

- refrain from drinking alcohol or using profanity in the presence of athletes
- avoid any behaviour which may be misunderstood or misinterpreted by athletes
- maintain your self-control at all times
- treat everyone fairly within the context of their activity, regardless of gender, place of origin, colour, sexual orientation, religion, political belief, or economic status
- be helpful to and supportive of everyone associated with Special Olympics

Demonstrate Good Sportsmanship and Cooperation:

- consistently focus on the Athlete and the Special Olympics Mission
- respect the rules and support the decisions of all sports officials and committees
- follow proper protest protocols
- be respectful during ceremonies and help your athletes be the same
- praise the athletes for their efforts and encourage them to celebrate the success of others
- direct comments or criticism at the performance rather than the athlete
- support and encourage other volunteers and staff

Dress appropriately as a sport coach for all regular training sessions and competitions:

- dress in athletic clothing including athletic footwear
- wear your red Special Olympics coach t-shirt or other Special Olympics clothing
- do not wear jewellery or jeans

(tick this box)

I have read and understood the BC Special Olympics Volunteer Code of Conduct. By typing my name I agree to follow these guidelines throughout my volunteer assignment. I understand that any breach of this Code will result in disciplinary action.

Volunteer Name

Date