



## STATE SUMMER GAMES HOUSING FORM

This form **MUST** be completed and returned with the games registration packet.  
 Housing assignments should be made using the attached Special Olympics South Carolina Housing Policy and Procedures guidelines.

DELEGATION:

DATE:

**Total # in Delegation**

# of Males:      # of Females:      # of Athletes/Partners:      # of Coaches/Chaperones/Volunteers:

Males		Females	
Athletes/Unified Partners		Athletes/Unified Partners	
Coaches/Chaperones/Volunteers		Coaches/Chaperones/Volunteers	

