



9560 Franklin Avenue
Franklin Park, Illinois 60131

www.fpparks.org

Administrative Offices
847-455-2852
Fax: 847-455-9053

Ice Arena
847-671-4268

North Park
847-678-4021

Service Center
847-451-1507

**Park District Board
of Commissioners**

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**Director of Parks
and Recreation**

November 11, 2019

Dear Special Needs Participants:

Please find enclosed the registration packet for the twenty-fourth annual Special Needs Skating Competition. This year's exciting event will take place on **Saturday, January 11, 2020** and again will be hosted by the Park District of Franklin Park. The registration deadline for participation is **December 13, 2019**.

Similar to last year, we will be providing lunch free of charge to all registered coaches and skaters. There is an additional \$7 charge for anyone else wishing to participate in lunch. Wristbands will be distributed at check-in for all skaters, coaches and paid lunch admissions. Please make sure the Meal Ticket Reservation Form included in your packet is filled out and returned with your registration form.

As in the past, we want to make sure we have enough goody bags and awards for everyone who participates. **Please make sure when registering skaters, that both the Team Registration Form and the Waiver are completed.** We appreciate that pre-registration is done by December 13, 2019.

Participation in this wonderful event continues to be free. This remains possible because of the assistance that we receive from area sponsors who have a real interest in being a part of this worthwhile event. **If you are aware of any company or business that may be interested in providing assistance for this event either financially or through product donation, please provide the contact information and a sponsorship letter will be sent.** We would appreciate sponsorship contact information forwarded by December 1, 2019 so we have adequate time to secure their support. Contact information may be faxed to 847-671-4755 or emailed to araucci@fpparks.org.

My staff and I look forward to your participation in this rewarding event. Please contact me at araucci@fpparks.org or by phone at 847-671-4268 if you have any questions or need additional information. Do not forget, the registration deadline for participation is December 13, 2019.

Sincerely,

Anne Raucci

Anne Raucci
Skate School Director

Dear Coaches, Skaters, and Parents:

It's time for Franklin Park's Special Needs Skating Competition:

Saturday, January 11, 2020
Registration Deadline: December 13, 2019
Tentative Schedule
All events held on the Main Arena.

Figure Skating Skills Competition	8:30-9:30 am
Figure Skating Freestyle Competition	11:10am -12:50 pm
Sled Hockey	10:00-11:00 am
Short Track Speed Skating	1:45-3:30 pm
Ice Hockey	4:00-5:00 pm

Refreshments will be offered buffet style from 11:30 am until 2 pm
Free for registered participants and coaches, \$7 for anyone additional.

Athletes and coaches listed on the registration will receive free meal wristbands when they arrive. Family members who wish to enjoy the meal should complete the enclosed "Meal ticket Reservation". Cost for the meal ticket is \$7. Deadline to purchase meal ticket is December 13, 2019.

Thank you for responding early so we can prepare for the expected increase in attendance.

Return your completed registration and waiver to:

Franklin Park Ice Arena/Special Needs Skating Competition
Mail: 9711 W. Waveland Ave., Franklin Park, IL 60131
Phone: 847-671-4268
Fax: 847-671-4755
E-mail: **araucci@fpparks.org**
Web site: fpice.com

If you have any questions, please contact us:

General inquiries & Hockey:	Anne Raucci, Skate School Director	847-671-4268
	araucci@fpparks.org	
Speed Skating:	Anita Healy, Speed Skating Coordinator	847-228-3499
	ahealy@elkgroveparks.org	
Figure Skating:	JoAnn Snyder, Figure Skating Coordinator	630-306-0938
	zieglerhouse@yahoo.com	

Special Needs Skating Competition

SATURDAY, JANUARY 11, 2020

Event Information and Registration Forms

The Park District of Franklin Park invites special needs skaters to the 28th annual competition. We are pleased to offer a day of healthy competition and camaraderie to figure and speed skaters along with ice and sled hockey players. All participants will receive awards.

*****Tentative Schedule**:***

Figure Skating

Skills Check in	7:45-8:30 a.m.	Meeting room
Skills Compete	8:30-9:35 a.m.	Main arena
Skills Awards	9:50 a.m.	Lobby
Refreshments	10:30 a.m.	Meeting room
Freestyle Check in	10:15-11:00 a.m.	Meeting room
Freestyle Compete	11:10 a.m.–12:50 p.m.	Main arena
Freestyle Awards	1:10 p.m.	Lobby

Sled Hockey

Check in	9:15-9:45 a.m.	Meeting room
Exhibition	10:00-11:00 a.m.	Main arena
Awards	11:00 a.m.	Main arena
Refreshments	11:20 a.m.	Meeting room

Speed Skating

Check in	12:45-1:15 p.m.	Lobby
Refreshments	12:30 p.m.	Meeting room
Warm-up	1:30-1:40 p.m.	Main arena
Races	1:50-3:20 p.m.	Main arena
Awards	3:30 p.m.	Lobby

Please remain in your speed skating uniforms for awards then change into hockey gear.

Hockey

Check in	3:00-3:45 p.m.	Front desk
Refreshments	Ends at 3:00 p.m.	Meeting room
Exhibition	4:00-5:00 p.m.	Main arena
Awards	5:00 p.m.	Main arena

Speed Skaters awaiting their races should sit in Bleacher Section A

Complete the enclosed entry forms, sign the waiver, and return by **December 13th**. Entry forms can be mailed or faxed to: Franklin Park Ice Arena / Special Needs Competition

To: Franklin Park Ice Arena / Special Needs Skating Competition
Address: 9711 W. Waveland Ave/ Franklin Park IL 60131
Phone: 847-671-4268
Fax: 847-671-4755
E-mail: araucci@fpparks.org

SPEED SKATING

THIS YEAR: You can register for a fun race: 1000M to be held at end of racing, providing we have time.

1. This is an ability-based competition in which only TIME is a factor. Age and gender are not basis for determining divisions. Divisions may be combined, divided, or altered as needed to enhance competition.
2. Races will be conducted in accordance with the USS Short Track Speed Skating rules and regulations and point scoring. 1st=34, 2nd=21, 3rd=13, 4th=8, 5th=5, 6th=3.
3. Divisions will be based on a skater's performance at last year's FP meet or time submitted. **NEW COMPETITORS:** Submit a time for 111 or 100 Meters. If time is unavailable, indicate how skater's ability compares to teammates.
4. Distances may be altered based on current registration.
5. The track will be 111 meters.
6. Each competitor will race in three distances, staying in the same group of competitors.
7. Trophies are awarded based on overall performance

All Speed Skaters must wear the following:

Protective helmet, gloves, long-sleeved shirt, kneepads, and neck guard. Shin guards are recommended.

DIVISION – tentative. Actual will be determined by registration	Time, in seconds for one lap	Race Distance in Meters
A	60+	55, 111, 55
B	50-59	111,222,333
C	45-49	111,222, 333
D	40-44	111,222,333
E	35-39	222,333,500
F	30-34	222,333,500
G	19-29	333,500,777
H	18 and under	333,500,777

If you have specific speed skating questions, please contact Anita Healy, Speed Skating Coordinator at 847-228-3499 or by email to ahealy@elkgroveparks.org.

FIGURE SKATING

1. **We will utilize the rules and regulations set forth in the most recent Special Olympics Winter Handbook.** ISI Special Skater is not offered. This year we will continue the new short program for levels 3-6 for compulsories as outlined by Special Olympics.
2. Skating competitors must be able to complete required moves and program at registered level, independently enter, perform and exit the ice without any assistance, physical or verbal, to compete. The competitor is the only individual allowed on the ice during their performance. Any skater unable to meet basic requirements will be considered exhibition.
3. **Non-read writable compact disk** must be turned in at the registration table prior to the start of competition. Please mark the CD with your name, level, and song title. Only one song per CD.
4. For each level, all compulsories will be completed first followed by the program portion.
5. Due to time constraints we reserve the right to limit the number of figure skating registrants.

If you have specific figure skating questions, please contact:

JoAnn Snyder, Figure Skating Coordinator: 630-306-0938 / zieglerhouse@yahoo.com

Registration Deadline: December 13, 2019.

Registration Form~ SPEED SKATING

Please return by Friday, December 13, 2019

Please type or print legibly.

Team Name _____ Head Coach _____

Team Leader _____ Email _____

Address _____ Phone _____

City _____ State _____ Zip _____

SPEED SKATERS

Name	Age as of 01/11/20	Gender	111/100 Meter Time	"X" if you want to Skate the Fun 1000
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				

If you have specific speed skating questions, please contact Anita Healy, Speed Skating Coordinator at 847-228-3499 or by email to ahealy@elkgroveparks.org.

Each athlete or parent must sign the enclosed Park District of Franklin Park waiver. **Please return the signed waivers with your registration form**

To: Franklin Park Ice Arena / Special Needs Skating Competition
Address: 9711 W. Waveland Ave/ Franklin Park IL 60131
Phone: 847-671-4268
Fax: 847-671-4755
E-mail: araucci@fpparks.org

Registration Form~FIGURE SKATING

Please return by Friday, December 13, 2019

Please type or print legibly.

Agency Name: _____

Head Coach Name: _____

Coach's Phone: _____

Coach's Email: _____

Skater or Skater's Main Contact Email: _____

FIGURE SKATERS

Indicate if competing Pairs with a partner

Name (first & last)	Address (city, state, zip)	Phone	DOB mm/dd/yy	Skill Level	Freestyle Level
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					

If you have specific figure skating questions, please contact JoAnn Snyder, Figure Skating Coordinator at 630-306-0938 or by email at zieglerhouse@yahoo.com

Due to time constraints we reserve the right to limit the number of figure skating registrants.

Each athlete or parent must sign the enclosed Park District of Franklin Park waiver. **Please return the signed waivers with your registration form**

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E-mail: araucci@fpparks.org

Registration Form~SLED or ICE HOCKEY

Please return by Friday, December 13, 2019

Please type or print legibly.

Check One: ☐ Sled Hockey ☐ Ice Hockey

Team Name _____ Head Coach _____

Team Leader _____ Email _____

Address _____ Phone _____

City _____ State _____ Zip _____

<i>Enter names of your Hockey Players</i>	
1.	15.
2.	16.
3.	17.
4.	18.
5.	19.
6.	20.
7.	21.
8.	22.
9.	23.
10.	24.
11.	25.
12.	26.
13.	27.
14.	28.

If you have specific hockey questions, please contact Carla Deak at 847-671-4268 or by email at cdeak@fpparks.org

Each athlete or parent must sign the enclosed Park District of Franklin Park waiver. Please return the signed waivers with your registration

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Fax: 847-671-4755
E-mail: araucci@fpparks.org

If faxed or e-mailed, please confirm with phone call. Thank You

Volunteers

Speed Skating volunteer registration form

~ If your team has some experienced officials who would like to volunteer for Franklin Park's Special Needs Competition, enter their names below and write in their desired job(s). You can return this form along with your skater registration. Thank you in advance for your support of this important event.

Please type or print legibly.

Team Name _____ Head Coach _____

Positions available: ~TIMERS ~LAP COUNTER
 ~FINISH JUDGES ~STARTER
 ~DOOR MONITOR ~HEAT BOX ASSISTANT CLERKS

VOLUNTEER'S Name	Desired Job(s)

Franklin Park Ice Arena*9711 W. Waveland Ave/ Franklin Park IL 60131*847-671-4268
www.fpice.com

Meal Ticket Reservation Form

So that we may provide adequate refreshments, everyone must RSVP by December 13, 2019 to participate in lunch.

Registered skaters, coaches and volunteers are free; others are \$7 per person.

Skater and Coach Meal Ticket Reservation Form

Skater's name:			
Address:	City:	State:	Zip:
Phone:			
List coaches attending lunch below.			
Coach's name:		Coach's name:	
<i>Total @ no charge:</i>			

Parents and Spectator Meal Ticket Reservation Form (please list all names below)

Name:	
Name:	
Name:	
Name:	
<i>Total @ \$7 per person:</i>	
<i>Total \$ enclosed:</i>	

Please enclose \$7 per person. Check made payable to **Franklin Park Ice Arena** or supply credit card information below.

Credit Card Type: Visa ☐ Mastercard ☐ Discover ☐ AMEX ☐

Credit Card Number: _____ Exp Date: _____ CVV: _____

Authorized Signature: _____ Date: _____

Return this form with payment by December 13 to:

Franklin Park Ice Arena
9711 Waveland Ave
Franklin Park IL 60131
Fax: 847-671-4755

All lunch wristbands will be distributed at check in.

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Park District of Franklin Park ~WAIVER

Team Coach/Leader: If you have more than four skaters, please make extra photocopies of this waiver. THIS WAIVER MUST BE SIGNED BY THE PARTICIPANT OR PARENT/LEGAL GUARDIAN IF THE PARTICIPANT IS UNDER 18 YEARS OLD

RELEASE, HOLD HARMLESS AND INDEMNIFICATION

The Park District of Franklin Park is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Park District of Franklin Park continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program must recognize that there is an inherent risk of injury when choosing to participate in recreational activities.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or adequately skilled for ice-skating activities. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

WARNING OF RISK

Ice-skating is intended to challenge and engage the physical, mental and emotional resources of the participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury, including but not limited to head injury, neck or back injury, wrist and ankle fractures, and other orthopedic injuries to limbs and joints. All hazards and dangers cannot be foreseen. The very nature of ice-skating is risky, including but not limited to slip and falls, colliding with other players of varying degrees of skill (including being struck from behind), tripping on irregular ice surfaces, cuts from skate blades, inadequate or defective equipment, ill-fitting skates, failure in supervision or instruction, horseplay, carelessness, poor technique, poor conditioning, rule violations, striking a stationary object, premises defects outside the rink, and all other risks inherent to the sport of ice-skating. In this regard, it must be recognized that it is impossible for the Park District of Franklin Park to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Park District of Franklin Park, including its officials, agents, volunteers and employees.

Please fill out individual information on **each skater.**

Print skater's name	Phone	Age
Address:	City:	State: Zip:
Guardian's Signature	Date	
Skater's Main Contact Email:		

Print skater's name	Phone	Age
Address:	City:	State: Zip:
Guardian's Signature	Date	
Skater's Main Contact Email:		

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