

## Appendix VII - Request for Modification

If an athlete needs modification for equipment use, starts, lane placement etc. complete this form and return to Special Olympics Newfoundland and Labrador provincial office.

**Athlete:** \_\_\_\_\_

**Event:** \_\_\_\_\_

**Club:** \_\_\_\_\_

**Head Coach:** \_\_\_\_\_

Exemption Needed For	Modification	Reason
<b>Example:</b> Hearing Impairment	Needs a touch start	Athlete is unable to hear the starting clapper

**This form must be submitted by the Sport Specific registration deadline date set by SONL.**

**Submit To:** SONL

[miked@sonl.ca](mailto:miked@sonl.ca)

Fax: 1-709-738-0119

In Person: 87 Elizabeth Ave. St. John's, NL