LAW ENFORCEMENT TORCH RUN® FOR SPECIAL OLYMPICS FLORIDA

Tip-A-Cop/Event Report Form **Date:** _____

Special Olympics County Program: _____

Contact: _____ Phone: _____

Event Date(s): _____ Location: _____

Name of coach, athlete, parent, and/or volunteer who participated in the event:
(Please list by event, use reverse side if needed)

_____ _____

_____ _____

_____ _____

_____ _____

Law Enforcement Agency: _____

Law Enforcement Contact: _____

Please attach press releases, letters to coaches, and or any printed materials that your county produced.

E-Mail or fax report form to:

Special Olympics Florida
Laura Collins – Torch Run Manager
LauraCollins@sofl.org
352-243-9568 (fax)
407-402-4423 (cell)