**CERTIFICATE OF COMPLETION**

*In recognition of*

COACH NAME

*for successfully completing the Special Olympics Fitness Captain Training, and committing to support their athletes to fulfill their duties as a Fitness Captain.*

*Graphical user interface

Description automatically generated with low confidence![Shape, square

Description automatically generated]()*

*Shape

Description automatically generated with medium confidence*

**GWENDOLYN APGAR**

*Senior Manager, Fitness for Sports Performance*

*Special Olympics International*

**YOUR NAME HERE**

*Your Title Here*

*Your Program Name Here*



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