

National Junior Disabled Sports Championships 2004 Registration Packet

Sponsoring Disabled Sports Organizations



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*Hosted by the Mesa Association of Sports for the Disabled
Mesa, Arizona*

"Let no one sit on the sidelines!"

The Mesa Association of Sports for the Disabled

“Let no one sit on the sidelines!”



April, 2004

Dear Friends of Disabled Sport;

The Mesa Association of Sports for the Disabled is honored and excited to be hosting the National Junior Disabled Sports Championships for 2004. This event represents a milestone in the disabled sports movement in that it will mark the first time that a national championship has been held solely for junior athletes with all types of disability. To that end, I would like to thank the National Disability Sports Alliance; Wheelchair Sports, USA; Disabled Sports, USA; the United States Association of Blind Athletes; and the United States Disabled Athlete's Fund for their support of the games. Our Association is pledged to making this an outstanding event in terms of competition, enduring friendships and lasting memories.

Mesa, Arizona is one of the fastest growing cities in the United States and is currently the 43rd largest city in the country. I know I speak for the city government, the school district and the community at large when I say that we are looking forward to hosting this national event and sharing our great city with you! It goes without saying that Arizona in July is HOT.....as you can see from the schedule, the Local Organizing Committee has gone to great lengths to plan events around the heat. As those of you who joined us for Junior Nationals in 1997 can attest, scheduling around the heat makes the events quite tolerable. In addition, this packet will contain advice on how to handle the heat in terms of team preparation, transport and leisure.

The following page contains important contact information for the games. If you have any questions or concerns, the individuals on the following page are available to assist you. Please make note of the role that each individual serves; do not email the host hotel for questions on the schedule. In addition, our website listed below will have additional and updated information posted after May 1. Please familiarize yourself with the enclosed registration materials. It is your responsibility and that of your coach to be prepared when you arrive in Arizona. It is the responsibility of the LOC to ensure a quality experience once you get here and we pledge to provide that for each of you!

We look forward to seeing you in Mesa in July!

Sincerely,

Gregg J. Baumgarten, Games Director
National Junior Disabled Sports Championships 2004

***The Mesa Association of Sports for the Disabled
59 East Broadway Road
Mesa, Arizona 85210-1625
(480) 835-MASD
www.mesadisabledsports.com***

National Junior Disabled Sports Championships 2004 Contact Numbers and Addresses

Mailing Address:

**National Jr. Disabled Sports Championships 2004
Mesa Sports for the Disabled
59 East Broadway Road
Mesa, AZ 85210-1625**

Gregg Baumgarten, Games Director

**Mesa Public Schools
voice (480) 472-0638
fax (480) 472-0705
email: gjbaumga@mpsaz.org**

Lane Jeppesen, Executive Director

**Mesa Association of Sports for the Disabled
voice (480) 835-MASD
fax (480) 610-2257
email: lane@mesadisabledsports.com**

Mark Grant, Director of Competition

**Mesa Parks & Recreation Division
voice (480) 644-3651
fax (480) 644-2698
email: Mark.Grant@cityofmesa.org**

Susan Byrne, Asst. Director of Competition

**Mesa Parks & Recreation Division
voice (480) 644-2354
fax (480) 644-2698
email: Susan.Byrne@cityofmesa.org**

Host Hotel: Sheraton Phoenix East

**Deliah Rose, Sales Manager
Reservations (480) 898-8300
fax (480) 464-5068
www.sheratonphoenixeast.com
email: drose@pacificahost.com**

Travel Arrangements: Carlson Wagonlit Travel-Serenity Travel Group

**Cris Tutera, Travel Agent
cell (480) 225-5059
fax (480) 813-6773
www.serenitytravel.com
email: ctutera@aol.com**

Websites

**Games Information Updates: www.mesadisabledsports.com (After May 1)
City of Mesa Information: www.cityofmesa.com
Mesa Public Schools Information: www.mpsaz.org
Hotel Information: www.phoenixsheratoneast.com
Travel Arrangements: www.serenitytravel.com**

National Junior Disabled Sports Championships Fact Sheet

What: 2004 National Junior Disabled Sports Championships

When: Saturday, July 10th through Saturday, July 17th, 2004 (see schedule).

Who: All athletes between the ages of 6 and 21 (See Eligibility section for more detailed information) who have met DSO (Disabled Sports Organization) qualifying standards at a sanctioned regional qualifying meet. All participating athletes and coaches must be current members of the DSO under which they will be competing. Disabilities may include but not be limited to:

Spinal Cord Injury	Spina Bifida
Traumatic Brain Injury	Cerebral Palsy
Muscular Dystrophy	Amputation
Osteogenesis Imperfecta	Dwarfism
Blind	

If you are unsure as to eligibility for this meet, contact the meet director.

Events:

Archery	(Bowstand; Sitting; Standing)
Boccia	(Ramp and Non-Ramp)
Field	(Shot put; Javelin; Discus; Long Jump; Distance Toss; High Toss; Spungdisc; Club Throw; Precision Toss; Thrust & Distance Kick; High Jump, Softball Throw)
Goalball	(USABA)
Swimming	(Short Course, Outdoor pool-8 Lane 25 yard length; Colorado Timing System)
Table Tennis	Stiga Competition Tables
Track	(8 Lane Tartan surface Track: moderately fast: 400 Meter Track-100 Meter straights and 100 Meter Curves: Lynx Timing System)
Weightlifting	Bench Press; Powerlift
3 X 3 Wheelchair Basketball	

Where: Mesa is a city of 430,000 people just outside of Phoenix and is approximately 15 miles southeast of Sky Harbor Airport. The host hotel will be the Sheraton-Phoenix East (soon to be the Marriott!) in downtown Mesa. All venues are listed below with mileage from the host hotel

Venue Sites:

Sheraton-Phoenix East, 200 North Centennial Way (Between Country Club & Mesa Drive; University Ave. & Main Street)

Registration/Classification
Weightlifting

Mesa High School, 1630 E. Southern Avenue (Between Stapley Ave. & Gilbert Rd.) Distance from host hotel: 3.5 miles.

Archery
Field
3 X 3 Wheelchair Basketball

Mountain View High School, 2700 East Brown Road (Corner of Brown Road & Lindsay Drive) Distance from host hotel: 4.5 miles.

Opening Ceremonies
Track

Westwood High School, 945 West 8th Street (Between Alma School Road & Country Club Drive) Distance from host hotel: 2 miles.

Boccia
Table Tennis

Dobson High School, 1501 West Guadalupe Road (Guadalupe Road between Alma School and Dobson Roads) Distance from host hotel: 6 miles.

Goalball

Kino Pool, 848 North Horne (Between Stapley & Mesa Drives; Brown Road & University Drive) Distance from host hotel: 1.5 miles.

Swimming

(All venues are subject to change before games)

Membership: Athletes competing must be members of their appropriate DSO. Memberships should be completed and sent to the appropriate DSO before coming to the Junior Nationals. More information is included in this packet.

This event will be sponsored by the following Disabled Sports Organizations (DSO's). Browse to each listed website for membership information:

Wheelchair Sports, USA :
www.wsusa.org

Spinal Cord Injury; Spina Bifida

Disabled Sports, USA: www.dsusa.org	Amputee
National Disabled Sports Alliance.: www.ndsaonline.org	Cerebral Palsy, Traumatic Brain Injury, Stroke & certain genetic diseases
U.S. Association of Blind Athletes: www.usaba.org	Blind

Classification & Format:

Each athlete will be classified according to their functional ability, enabling each athlete to compete against other athletes of similar abilities. Because the Junior Nationals features athletes from several DSO's, several classification systems will be utilized.

Wheelchair Sports, USA	Functional Classification
Disabled Sports, USA	Track & Field: Amputee Classification Swimming: Functional Classification
NDSA Athletes	Track & Field: CP Classification 1 through 8 Swimming: Functional Classification
USABA Athletes	Track & Field: Blind Classification Swimming: Blind Classification

Events will be heated based on classification, age division and, in most cases, gender. Due to limited numbers in some classifications, some athletes in different classifications may be heated together if qualifying times are competitive. However, all awards will be based on classification, age and gender.

Age Divisions are as follows:

Division A	Ages 7-9
Division B	Ages 10-12
Division C	Ages 13-15
Division D	Ages 16-18
Division E	Ages 19-21

Competitive age for events is determined by the athlete's age as of January 1, 2004.

Awards/Registration Fees:

The registration fee will include the event t-shirt, commemorative plaque, adhesive place medals for the first eight finishers for placement on the plaque, MASD fun bucks to be used to purchase pop, candy, etc., event program and other give-aways.

NDSA Junior Events Offered

NDSA Track & Field	A	B	C	D/E
Class 1	60 M. Weave, High Toss, Precision, Soft Shot, Soft Discus, Straight 60 M.	60 M. Weave, High Toss, Precision, Soft Shot, Soft Discus, Straight 100 M.	60 M. Weave, High Toss, Precision, Soft Shot, Soft Discus, Straight 100 M.	60 M. Weave, High Toss, Precision, Soft Shot, Soft Discus, Straight 100 M.
Class 2U	20 M, 60 M, 100 M Club, Softball, Soft Discus, Shot, Precision	20 M, 60 M, 100 M, 200 M, Club, Soft Discus, Softball, Shot	20 M, 60 M, 100 M, 200 M, Club, Discus, Shot	20 M, 60 M, 100 M, 200 M, 400 M, Club, Discus, Shot
Class 2L	20 M, 60 M, 100 M, Thrust Kick, Distance Kick	20 M, 60 M, 100 M, 200 M, Thrust Kick, Distance Kick	100 M, 200 M, 400 M, Thrust Kick, Distance Kick	100 M, 200 M, 400 M, 800 M, 1500 M, Thrust Kick, Distance Kick
Class 3	20 M, 60 M, 100 M, 200 M, Softball, Soft Discus, Precision, Club	60 M, 100 M, 200 M, 400 M, Club, Softball, Soft Discus, Shot	100 M, 200 M, 400 M, 800 M, Discus, Shot, Javelin, Pentathlon	100 M, 200 M, 400 M, 800 M, 1500 M, Club, Discus, Shot, Javelin, Pentathlon
Class 4	60 M, 100 M, 200 M, 400 M, Shot, Club, Discus, Softball	60 M, 100 M, 200 M, 400 M, 800 M, Club, Discus, Shot, Small Javelin	100 M, 200 M, 400 M, 800 M, 1500 M, Club, Discus, Shot, Javelin, Pentathlon	100 M, 200 M, 400 M, 800 M, 1500 M, Club, Discus, Shot, Javelin, Pentathlon
Class 5A	20 M, 60 M, 100 M, 200 M, Softball, Soft Discus, Club, Precision	20 M, 60 M, 100 M, 200 M, Club, Softball, Soft Discus, Shot	60 M, 100 M, 200 M, 400 M, Club, Discus, Shot, Javelin, Pentathlon	100 M, 200 M, 400 M, Club, Discus, Shot, Javelin, Pentathlon
Class 5B	20 M, 60 M, 100 M, 200 M, Softball, Club, Soft Discus, Precision, Long Jump	20 M, 60 M, 100 M, 200 M, 400 M, Club, Shot, Soft Discus, Long Jump, Small Javelin	60 M, 100 M, 200 M, 400 M, 800 M, Club, Discus, Shot, Javelin, Long Jump, Pentathlon	100 M, 200 M, 400 M, 800 M, , Club, Discus, Shot, Javelin, Long Jump, Pentathlon
Class 6	20 M, 60 M, 100 M, 200 M, Club, Softball, Discus, Precision, Long Jump	60 M, 100 M, 200 M, 400 M, 800 M, Club, Shot, Soft Discus, Long Jump, Small Javelin	100 M, 200 M, 400 M, 800 M, 1500 M, Club, Shot, Discus, Long Jump, Javelin, Pentathlon	100 M, 200 M, 400 M, 800 M, 1500 M, Club, Shot, Discus, Long Jump, Javelin, Pentathlon
Class 7	60 M, 100 M, 200 M, 400 M, Softball, Club, Soft Discus, Shot, Long Jump	60 M, 100 M, 200 M, 400 M, 800 M, 1500 M, Club, Small Javelin, Discus, Shot, Long Jump	100 M, 200 M, 400 M, 800 M, 1500 M, Javelin, Discus, Shot, Long Jump, Pentathlon	100 M, 200 M, 400 M, 800 M, 1500 M, Javelin, Discus, Shot, Long Jump, Pentathlon
Class 8	60 M, 100 M, 200 M, 400 M, Softball, Club, Soft Discus, Shot, Long Jump	60 M, 100 M, 200 M, 400 M, 800 M, 1500 M, Club, Small Javelin, Shot, Discus, Long Jump	100 M, 200 M, 400 M, 800 M, 1500 M, Javelin, Discus, Shot, Long Jump, Pentathlon	100 M, 200 M, 400 M, 800 M, 1500 M, Javelin, Discus, Shot, Long Jump, Pentathlon

WSUSA Track Events	A	B	C	D/E
T1 & T2	60 M, 100 M, 200 M, 400 M Relays	60 M, 100 M, 200 M, 400 M, 800 M, Relays	60 M, 100 M, 200 M, 400 M, 800 M, 1500 M, 5000 M, Relays	60 M, 100 M, 200 M, 400 M, 800 M, 1500 M, 5000 M, Relays
T3 & T4	60 M, 100 M, 200 M, 400 M, 800 M, Relays	100 M, 200 M, 400 M, 800 M, 1500 M, 5000 M, Relays	100 M, 200 M, 400 M, 800 M, 1500 M, 5000 M, Relays	100 M, 200 M, 400 M, 800 M, 1500 M, 5000 M, Relays

WSUSA Field Events	A	B	C	D/E
F1	Softball, Club, Discus	Softball, Club, Discus	Softball, Club, Discus, Pentathlon	Softball, Club, Discus, Pentathlon
F2	Softball, Discus, Javelin	Shot, Discus, Javelin	Shot, Discus, Javelin, Pentathlon	Shot, Discus, Javelin, Pentathlon
F3-F9 F9 does not do Pentathlon	Softball, Discus, Shot, Javelin	Shot, Discus, Javelin	Shot, Discus, Javelin, Pentathlon	Shot, Discus, Javelin, Pentathlon

All Swimming Events:	Athletes can participate in a maximum of 7 individual events. Only 1 IM event is allowed.			
	Functional Class	A	B	C
25 Freestyle	S1 to S13	S1 to S13	S1 to S4	S1 to S4
50 Freestyle	S1 to S13	S1 to S13	S1 to S13	S1 to S13
100 Freestyle		S5 to S13	S1 to S13	S1 to S13
200 Freestyle		S5 to S13	S1 to S13	S1 to S13
400/500 Freestyle			S6 to S13	S6 to S13
25 Backstroke	S1 to S13	S1 to S13	S1 to S4	S1 to S4
50 Backstroke	S1 to S13	S1 to S13	S1 to S13	S1 to S13
100 Backstroke		S5 to S13	S1 to S13	S1 to S13
25 Breaststroke	SB1 to SB9, 11-13	SB1 to SB9, 11-13	SB1 to SB3	SB1 to SB3
50 Breaststroke		SB3 to SB9, 11-13	SB1 to SB9, 11-13	SB1 to SB9, 11-13
100 Breaststroke			SB3 to SB9, 11-13	SB3 to SB9, 11-13
25 Butterfly	S5 to S13	S1 to S13	S1 to S5	S1 to S5
50 Butterfly		S5 to S13	S1 to S13	S1 to S13
100 Butterfly			S5 to S13	S5 to S13
4 X 25 I.M.	SM4 to SM13	SM4 to SM13	SM3 to SM13	SM1 to SM6
3 X 25 I.M.	SM1 to SM13	SM1 to SM13	SM1 to SM4	SM1 to SM4
4 X 50 I.M.			SM3 to SM13	SM3 to SM13
3 X 50 I.M.			SM1 to SM4	SM1 to SM4

Disabled Sports Organizations & Membership Info:

Athletes must be members of the appropriate Disabled Sports Organizations (DSO) in order to compete. As an example, athletes with Cerebral Palsy competing in Track & Field, Boccia, Archery, etc. must be a current member of the NDSA in order to participate. An athlete can be a member of more than one DSO, but they must be a member of at least one DSO. Athletes will be expected to present proof of membership at registration. For more information:

Spinal Cord Injury, Spina Bifida, etc:

Wheelchair Sports, USA
10 Lake Circle Suite G19
Colorado Springs, CO 80906
719-574-1150
wsusa@aol.com*****www.wsusa.org

Cerebral Palsy, Head Injury, Stroke, Genetic Diseases, etc:

National Disabled Sports Alliance
25 Independence Way
Kingston, RI 02881
401-874-7465
jmccole@ndsasonline.org*****www.ndsasonline.org
Jerry McCole, Executive Director

Amputees, Both Congenital (from birth) and Surgical:

Disabled Sports, USA
451 Hungerford Drive Suite 100
Rockville, MD 20850
301-217-0960
Kirk Bauer, Executive Director
programs@dsusa.org*****www.dsusa.org

Blind athletes:

United States Association of Blind Athletes
33 North Institute
Colorado Springs, CO 80903
719-630-0422
Mark Lucas, Executive Director
www.usaba.org

Dwarf athletes:

Dwarf Athletic Association of America
418 Willow Way
Lewisville, TX 75067
214-317-8299

**Ground
Transportation:**

Due to safety concerns with regards to the heat, each team/individual will be responsible for their own ground transportation between the airport, hotels and venue sites. Phoenix is served by all the major car rental agencies. The Games Committee has arranged for each rental agency to reserve a number of vehicles, minivans, etc. Wheelchair lift vans are also available through wheelchairgetaways.com. In addition, Cris Tuterera from Serenity Travel can make all of your rental and travel arrangements in one easy step. She can be reached at 480- 225-5059 or at ctuterera@aol.com. The Games Committee is committed to assisting teams with equipment transport from airport to venue site and is arranging for on site equipment storage at each venue site. However, transportation of athletes, families, support staff, etc. is the responsibility of each team or family.

**Hotel
Accommodations:**

The Sheraton Hotel at 200 North Centennial Way in Mesa is the host hotel for this year's Junior Nationals. The Sheraton is in the process of undergoing a \$9



million dollar remodeling and when completed, will become a Marriott Hotel. The Sheraton has both single and double king rooms available for \$75 per night plus 11.27 % tax. The meal plan for the Junior Nationals will be served at the Sheraton and a coach's room and athlete social room will also be available. For more information

on the Sheraton Hotel, go to their website at www.sheratonphoenixeast.com. To make reservations, call 480-898-8300 and identify yourself as being with the National Junior Disabled Sports Championships when making your reservations. For questions or additional information on the Sheraton Hotel, email Deliah Rose at drose@pacificahost.com.



The back-up hotel for the Junior Nationals is **the Holiday Inn** located on U.S. 60 and Country Club Drive in Mesa. The address is 1600 South Country Club Drive. Single and double king rooms are available at \$69 plus tax. Group rates are available three days prior and after event dates. In addition, two room family suites are available for an additional \$10 per night. A shuttle service can be arranged to and from the Sheraton Hotel for events. To make reservations, call 480-964-7000 and identify yourself as being with the National Junior Disabled Sports Championships. For questions regarding the Holiday Inn in Mesa, contact Alan Lenton at alenton@sunstonehotels.com. Additional information can be obtained by going to www.holiday-inn.com/phx-mesa.

Meal Plan:

A buffet style menu will be offered for the Junior Nationals and two meal plans are available for athletes, coaches, support personnel, parents, etc. All meals will be served at the Sheraton Hotel, our host hotel. To go cartons will be available for teams who need to be in other locations. Meals can also be purchased individually each day. All Meals will have coffee, tea, decaffeinated coffee, iced tea & milk stations.

Meal Plan A: This meal plan consists of eighteen meals, including Monday through Saturday breakfast and lunch; Monday through Friday dinner; and the Awards Banquet Meal. The cost for this plan is \$200 inclusive, including tax and gratuity.

Meal Plan B: This meal plan consists of twelve meals, including Monday through Friday breakfast and dinner, Saturday breakfast, and the Awards Banquet Meal. The cost for this plan is \$150 inclusive.

Traditional Buffet Breakfast

Scrambled Eggs (Varied Styles Each Day)
Breakfast Potatoes (Varied Styles Each Day)
One Day with No Eggs – Substitute with Waffles

Each Day

Danish, Bacon & Sausage,
Assorted Juices, Milk, Assorted Cereal

Individual breakfasts can be purchased at \$10.00 per person, inclusive

Luncheon Selections**Soup & Salad Bar**

Chilled Gazpacho
Summer Greens, Cucumbers, Artichoke Hearts, Tomatoes, Onions, Mushrooms, Shredded Cheese, Sunflower Seeds, Broccoli, Cauliflower, Pasta Salad,
Cottage Cheese, Potato Salad, Fresh Fruit Salad, Cole Slaw, Croutons
Bread Sticks
Cookies & Brownies

Southwest

Grilled Corn Salad
Cheese Enchiladas, Beef Burritos, Spanish Rice, Refried Beans
Chips & Salsa
Fresh Fruit Bowls
Churros & Empanadas

Across America

Garden Greens Salad
Tuna Salad
Country Fried Chicken, Grilled Hamburgers w/Condiments
Assorted Whole Fruit
Marinated Tomato, Cucumber & Red Onion Salad
Individual Bags of Assorted Chips
Apple, Peach & Cherry Pies

Little Italy

Warm Garlic Breadsticks
Classic Caesar Salad
Meat Lasagna
Vegetarian Lasagna
Steamed Garden Vegetables
Amaretto Cookies & Chocolate Biscotti

Head for the Ballpark

Garden Greens Salad w/Toppings
Grilled Chicken Breasts, Hot Dogs with Relish, Onions, Sauerkraut & Jalapenos
Red Skin Potato Salad
Fresh Fruit Bowl
French Fries
Chocolate Fudge Brownies & Fresh Baked Oatmeal Cookies
Individual Luncheon Buffets are available at \$14.00 per person, inclusive

Dinner Selections

Sonoran Buffet

Garden Greens Salad with Tri-Colored Tortilla Strips,
Orange Cilantro & Chipotle Ranch Dressing
Grilled Chicken Breast with Mole & Green Chilies, Carne Asada with a Black Bean Sauce
Sonoran Rice
Mixed Steamed Garden Vegetables
Margarita Flavored Cheesecake

East Meets West

Garden Greens with Dried Noodle & Mandarin Oranges
Orange Sesame Chicken, Beef & Broccoli
Fried Rice
Stir Fry Vegetables
Assortment of Cakes & Pies

Just Like Mom's

Rolls & Butter
Spinach Salad with Bacon Dressing
Pasta Salad & Cole Slaw
Garlic Mashed Potatoes
Meatloaf Topped with BBQ Sauce, Chicken & Dumplings
Mixed Steam Vegetables
Assortment of Fresh Baked Pies, Cookies & Brownies

The Venetian

Garlic Breadsticks
Classic Caesar Salad
Mushroom, Roma Tomato & Artichoke Heart Salad
Chicken w/Sundried Tomatoes & Capers in a Lemon Sauce, Sweet Italian Sausage with Peppers & Onions
Penne Pasta with Pesto
Italian Style Summer Beans
Assortment of Italian Pastries

Individual Dinner Buffets are available at \$17.00 per person, inclusive

Final Evening Awards Dinner

(Plated)

Warm Rolls & Butter
Butter Lettuce & Spinach with Raspberries, Toasted Almonds
& Raspberry-Lime Vinaigrette
Beef Stroganoff in a Classic Sour Cream Sauce
Served Over Egg Noodles
Summer Selection of Vegetables
Seasonal Berries with Vanilla Saboyne & Whipped Cream
Individual Banquet Tickets are available at \$45.00 per person, inclusive

Additional Information: A confirmation letter or an incomplete registration letter listing what your registration packet is lacking will be sent via the US Postal Service. If you receive an incomplete registration letter, you might be assessed a late fee if it is not taken care of by the registration deadline date (postmarked by June 11, 2004)

All classifications completed at the regional level must be reviewed and confirmed at Junior Nationals. If you feel there is a change in your athlete's functional ability due to a change in medical status, you can complete the "**Request for Classification Review**" form included in this packet. All athletes needing classification must be classified during the scheduled time. Athletes needing classification will be notified.

Swimmers need to go through bench testing during registration/classification and a water test. Water test time will be assigned during classification.

All athletes must be registered by 5 PM, Sunday, July 11th or they will not be eligible to compete. A late registration will be held on Thursday, July 15th at 1:00 PM for athletes competing in later events. **Only those athletes who make prior arrangements before June 11th to register and classify will be allowed to check in late.** Athletes who fail to complete the classification process before their events will be scratched from those events. Athletes should bring their competition equipment to the classification in the event that the classifiers need to observe athletes using their racing chairs, throwing chairs, strapping, etc.

Athletes may be registered by their coaches if they do **not** need to be classified and they have submitted a recent wallet-size, color head/shoulder photo with their registration packet. If a photo is not submitted with the registration packet, the athlete **must** come to registration to have a photo ID taken. You may also email a digital ID photo to gjbaumga@mpsaz.org.

Opening Ceremonies will take place on Sunday, July 11th at 6:30 PM at the Mountain View High School Track. All athletes attending are expected to wear their uniforms.

All athletes will be expected to dress according to the rules of competition. It is the responsibility of each athlete to know the dress code for each event in which they wish to compete. Failure to comply will result in possible disqualification according to NGB rules.

The rules in the WSUSA rulebook and each US NGB will be enforced during all events. All competitors are expected to know the rules of each sport in which they compete, as this is a national event. If you have questions concerning any rules, feel free to call the NGB representative or individual DSO for clarification prior to coming to the games.

Athletes may move up in class for more competition but must qualify in the class they will be competing in at Junior Nationals. Also, Pentathlon events are open to athletes from all DSO's, providing their age division and classification offer Pentathlon for that DSO.

**Additional
Information,
Continued:**

Arizona will be hot in July! Daytime temperatures can range from 110 to 115 degrees during the heat of the day. As you may have noticed, outdoor events have been scheduled for either early morning or evening. The Games Committee is committed to providing appropriate shade for staging, water and sun screen for all competitors. Help us out by bringing a hat with you, limiting your time under the sun, and getting plenty of fluids. Head of delegation should plan to bring or purchase shade screens for their individual teams.

Some other hints that will help you deal with the Arizona Heat: start your team vans ten minutes before the team loads up and run the air conditioning. For those teams from Minnesota, Wisconsin or Massachusetts, it's like warming up your vehicle in the winter! **Also, watch out for seat belt buckles!** Seat belt buckles in the summer are hot enough to burn skin and individuals with decreased sensation are at increased risk of suffering serious burns. The LOC will attempt to secure wind shield shades for each team van, a device that will decrease the temperature in your van by about fifteen degrees.

The "Honest Effort" rule will be in effect for Jr. Nationals. In other words, if the Games Director determines that an athlete intentionally missed an event without scratching prior to the event, he/she can be disqualified from all remaining events in that sport.

Helmets will be required for all wheelchair track events. Athletes will be expected to bring their own helmets for track; bows & arrows for archery; ramps for boccia; table tennis paddles, etc. All other equipment, such as field implements, boccia balls, table tennis tables and equipment, will be certified and provided by the LOC.

A protest procedure will be in effect for the Junior Nationals. A \$25 filing fee will be required when submitting the protest. This filing fee will be refunded if the protest is upheld or the fee will be forfeited if the protest is declined. The protest committee will be announced at the initial coach's meeting.

Public restrooms will be available at each site less than 50 feet from the athletic venues. Specialized restrooms are also available at each site for athletes requiring them. Catheter bags are to be emptied in the restrooms only.

The Games Committee reserves the right to withdraw an athlete from further competition for profanity, abusive behavior or other inappropriate conduct. Absolutely no alcohol or tobacco is to be used in the competition area by athletes, coaches, support staff or parents.

A dance will take place immediately following the awards ceremony on Saturday night, so bring your dancing clothes with you!

**2004 National Junior Disabled Sports Championships
Mesa, Arizona**

Saturday, July 10th

Registration/Classification	Westwood High	12:00 PM to 8:00 PM
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Sunday, July 11th

Registration/Classification	Westwood High	9:00 AM to 5:00 PM
Opening Ceremonies	Mt. View High	6:30 PM
5000 Meters	Mt. View High	7:30 PM
Opening Dance	Sheraton	8:30 PM
Coach's Meeting	Sheraton	9:30 PM

Monday, July 12th

Breakfast	Sheraton	6:00 to 9:00 AM
Pentathlon	Mt. View High	7:00 AM
Lunch	Sheraton	10:30 AM to 1:00 PM
Boccia	Westwood High	1:00 PM
Athlete Social	Sheraton	1:00 PM
Dinner	Sheraton	4:30 PM to 7:00 PM
Track	Mt. View High	6:30 PM
(800 M; 60 M; 60 M. Weave; 200 M; 800 M. Finals; 20 M; 800 M. W/C Open Inv.)		
Coach's Meeting	Sheraton	9:30 PM

Tuesday, July 13th

Breakfast	Sheraton	6:00 to 9:00 AM
Archery	Mesa High	7:00 AM
Lunch	Sheraton	10:30 AM to 1:00 PM
Boccia	Westwood High	1:00 PM
3 X 3 Basketball	Mesa High	1:00 PM
Dinner	Sheraton	4:30 to 7:00 PM
Track	Mt. View High	6:30 PM
(1500 M; 100 M; 200 M. Finals; 100 M. Finals; 1500 M. W/C Open Inv.)		
Athlete Social	Sheraton	8:00 PM
Coach's Meeting	Sheraton	9:30 PM

Wednesday, July 14th

Breakfast	Sheraton	5:15 to 9:00 AM
Field	Mesa High	7:00 AM
Lunch	Sheraton	10:30 AM to 1:00 PM
3 X 3 Basketball	Mesa High	1:00 PM
Athlete Social	Sheraton	1:00 PM
Dinner	Sheraton	4:30 to 7:00 PM
Track	Mt. View High	6:30 PM
(1500 M. Finals; 400 M; All Relays; 400 M. Finals; 100 M. Open Invitational)		
Coach's Meeting	Sheraton	9:30 PM

**2004 National Junior Disabled Sports Championships, Continued
Mesa, Arizona**

Thursday, July 15th

Breakfast	Sheraton	5:15 to 9:00 AM
Field	Mesa High	7:00 AM
Lunch	Sheraton	10:30 AM to 1:00 PM
Table Tennis	Westwood High	1:00 PM
Weightlifting Weigh-in	Sheraton	4:00 to 5:00 PM
Dinner	Sheraton	4:30 to 7:00 PM
Weightlifting	Sheraton	7:00 PM
Coach's Meeting	Sheraton	9:30 PM

Friday, July 16th

Breakfast	Sheraton	6:00 to 9:00 AM
Swimming	Kino Pool	8:00 AM
Lunch	Sheraton	10:30 AM to 1:00 PM
Goal Ball	Dobson High	1:00 PM
Dinner	Sheraton	4:30 to 7:00 PM
Junior Committee Mtg.	Sheraton	6:00 to 8:00 PM
Athlete Social	Sheraton	8:00 PM
Open Forum	Sheraton	8:30 PM

Saturday, July 17th

Breakfast	Sheraton	6:00 to 9:00 AM
Swimming	Kino Pool	8:00 AM
Lunch	Sheraton	10:30 AM to 1:00 PM
Goal Ball	Dobson High	1:00 PM
Awards Banquet	Sheraton	6:30 PM
Closing Dance	Sheraton	8:30 PM

Registration Checklist/Expense Worksheet

Registrant Name _____ Team _____

This checklist is provided to assist you in completing all necessary forms.

- Form 1-Athlete Information Form: To be completed by all registrants
- Form 2-Athlete Event Form: To be completed by all registrants
- Form 3A-Track Event Form: To be completed by all athletes competing in Track
- Form 3B-Field Event Form: To be completed by all athletes competing in Field
- Form 4-Swimming Event Form: To be completed by all athletes competing in Swimming
- Form 5-Relay Event Form: To be completed by Head Coach for relay teams
- Form 6-Qualifying Results Sheet: Required of all athletes
- Form 7-Team Information Form: To be completed by Head Coach for each team
- Form 8-Classification Request Form: Required of all athletes requesting Classification
- Form 9-Athlete Medical Form: Required of all athletes
- Form 10-Athlete Health History: Required of all athletes (parents must sign for minor athletes)
- Form 11-Waiver Form: Required of all athletes (parents must sign for minor athletes)
- Form 12-Athlete Biography Form: (Optional)

Please check the appropriate boxes and complete the expense formulas below.

- Registration Fee for _____ enclosed @ \$100** _____ **\$100**
- Late Fee for registrations postmarked after June 11 @ \$40** _____
- I do not wish to enroll in any meal plan offered.**
- I wish to enroll in Meal Plan A (Monday through Friday breakfast, lunch, dinner plus Saturday breakfast and lunch and Awards Banquet) at \$200 per plan** _____
- I wish to enroll in Meal Plan B (Monday through Friday breakfast, and dinner plus Saturday breakfast and Awards Banquet) at \$150 per plan** _____
- I wish to order _____ additional Awards Banquet Tickets @ \$45 each for the following individuals:** _____

Total Amount Submitted

Name on Check _____

Check # _____

*Make all checks out to:
2004 National Junior Disabled Sports Championships
59 East Broadway Road
Mesa, Arizona 85210-1625*

National Junior Disabled Sports Championships 2004

Form 1

Athlete Information Form

Mail Registration Packet to: National Junior Disabled Sports Championships
59 East Broadway Road
Mesa, AZ 85210-1625

Only those coaches and support personnel who are registered will be allowed in coach's meetings, etc.

All athletes and registered coaches must be a member of a DSO.

Registration Fee: \$100 per person Late Fee: \$40 (Postmarked after June 11)
Checks should be made out to National Junior Disabled Sports Championships 2004.
Please Print Clearly. Registrations must be postmarked by June 11, 2004

Athlete Coach Parent Support Staff

Registrant Name _____ Date of Birth _____

Address _____ Gender: Male Female

City _____ State _____ Zip Code _____

Contact Number _____ T-Shirt Size: XS S M L XL XXL XXXL
Adult Sizes

E-mail Address _____ Disability _____

Team Name _____ Coach's Name _____

Coach's Daytime Phone _____ Coach's Evening Phone _____

Are you currently a member of a DSO? _____ Which one? _____

Have you been classified previously? _____ If so, where & when: _____

NDSA (CP), USABA, Amputee Classification (if applicable) _____

DSO Classifications: Track _____ Field (include all) _____ Archery _____
Swimming (include all) _____ Table Tennis _____

I will be travelling with: **Family** **Team** (If travelling with your family, fill out information below. If travelling with a team, complete team travel arrangements.)

Person filling out information: _____
We will need assistance with equipment: yes no Amount & Type of equipment: _____
Arrival Airline: _____ Flight: _____ Date: _____ Time: _____
Departure Airline: _____ Flight: _____ Date: _____ Time: _____
Lodging Accommodations: _____

Athlete Event Form

Please check each of the events you wish to enter. You may enter as many events as you are capable of competing in. Please note the tentative schedule to avoid any possible conflicts.

Athlete name _____ Coach's Name _____

Please Print Clearly!

Track Events (Fill out Track & Field Form)

Field Events (Fill out Track & Field Form)

Swimming Events (Fill out Swimming Form)

Archery: Refer to the WSUSA or NDSA rulebooks.

Choose one: Recurve Bow Compound Bow Bowstand

Choose one: Novice Cadet Metric Cadet Metric Junior Metric

Intermediate Advanced/Intermediate

Open Event (A,B) Open Event (C,D,E)

Boccia

Individual-Class 1 Individual-Class 2 Individual-Class 1 w/ramp

Pairs-Class 1 w/ramp BC4 Team

Weightlifting: Weight Class _____ Bench Press Opening Lift _____ Powerlift Opening Lift _____

Table Tennis: Singles Doubles Open Singles Open Doubles

Open Novice

This class does not have to meet the qualifying standards to compete. Athletes competing in the Open Novice class last year can use those results to meet QS for the ensuing year to enter class and open events.

Team Competition: Please check all competitions that apply for this athlete; the coach should fill out the attached Team Competition Form for each team competing.

3 X 3 Wheelchair Basketball

Goal Ball

Boccia

Track & Field Event Form

Form 3A

Athlete name: _____ Team name: _____

Track Classification: _____ Field Classification(s): _____

Refer to the track event eligibility matrix in this games packet for your specific classification. There is no limit to the number of events, as long as you have met the qualifying standards for each event. Include the best qualifying time for each event.

Track Events

20 Meter _____ 60 Meter _____ 60 Meter Weave _____
(NDSA)

100 Meter _____ 200 Meter _____ 400 Meter _____

800 Meter _____ 1500 Meter _____ 5000 Meter _____

Relays: Refer to the track relay form to designate relay teams.

Form 3B

Field Events Refer to the field event eligibility matrix in this games packet for your specific classification. Include the best qualifying distance for each event.

Shot Put _____ Discus _____ Javelin _____

Club Throw _____ Softball _____ Long Jump _____

High Toss _____ Distance Toss _____ Precision Toss _____

High Jump _____ Pentathlon _____

Thrust Kick _____ Distance Kick _____

Swimming Event Form

Athlete name _____ Team name _____

Swimming Class(es): S (Free, Butter) _____ SB (Breast) _____ SM (Medley) _____

Refer to registration packet to determine distances for your classification. Include your best qualifying time for each event

Freestyle
 25 Yards _____ 50 Yards _____ 100 Yards _____

 200 Yards _____ 400 Yards _____
Backstroke
 25 Yards _____ 50 Yards _____ 100 Yards _____
Breaststroke
 25 Yards _____ 50 Yards _____ 100 Yards _____
Butterfly
 25 Yards _____ 50 Yards _____ 100 Yards _____
Individual Medley
 3 X 25 Yards _____ 4 X 25 Yards _____

 3 X 50 Yards _____ 4 X 50 Yards _____

Relays This athlete will be swimming relays. Please refer to the the Swimming Relay Form to register a relay team.

Track & Swimming Relay Forms

Form 5

This form is to be completed by the Head Coach only from each team. Refer to the Relay Points Matrix and include the name of the Qualifying Meet and Qualifying time. Include Relay Team names if applicable.

Coach's Name _____ **Team Name** _____

Compute team points for Track Relays from this table.

Compute team points for Swim Relays from this table.

	<u>T1/2, CP2/3</u>	<u>T3, CP4</u>	<u>T4</u>
A	1	2	3
B	2	4	6
C	3	6	9
D/E	4	8	12

	<u>S1-4</u>	<u>S5-6</u>	<u>S7-8</u>	<u>S9-10</u>
A	1	2	3	4
B	2	3	4	5
C	3	4	6	8
D/E	4	6	8	10

Track	Male	Female	Mixed	Qual. Meet & Time	Athlete Name & Classification	
4 X 100 Meter 10 Point					1.	2.
					3.	4.
4 X 100 Meter 20 Point					1.	2.
					3.	4.
4 X 100 Meter 30 Point					1.	2.
					3.	4.
800 Medley 30 Point					1.	2.
					3.	4.
800 Medley 40 Point					1.	2.
					3.	4.

Swimming	Male	Female	Mixed	Qual. Meet & Time	Athlete Name & Classification	
100 M Freestyle 10 Point					1.	2.
					3.	4.
100 M Freestyle 20 Point					1.	2.
					3.	4.
100 M Freestyle 30 Point					1.	2.
					3.	4.
200 M Freestyle 30 Point					1.	2.
					3.	4.
200 M Freestyle 40 Point					1.	2.
					3.	4.

Swimming	Male	Female	Mixed	Qual. Meet & Time	Athlete Name & Classification	
100 M Medley 15 Point					1.	2.
					3.	4.
100 M Medley 25 Point					1.	2.
					3.	4.
100 M Medley 35 Point					1.	2.
					3.	4.
200 M Medley 30 Point					1.	2.
					3.	4.
200 M Medley 40 Point					1.	2.
					3.	4.

2004 National Junior Disabled Sports Championships
Qualifying Results Information Sheet

Form 6

Athlete Name: _____ **Team Name:** _____

Date of Birth: _____ **Age Division (Circle One):** **A B C D E**

Listed below are the sanctioned qualifying meets held this year and their respective codes. For each event entered, enter your best qualifying results and the sanctioned meet code at which the result occurred. Failure to provide the athlete's fastest time will result in a detrimental seed.

Appalachian Games	AP	Illinois Classic	IC	Oklahoma Games	OK
Challenge 2004	CH	Illinois Games	IL	Rocky Mountain	RM
Cincinnati Games	CN	Maryland	MY	South Carolina	SC
Courage Center	CC	Mason Games	MG	Southeastern Games	SE
CSH Swim Meet	CS	Michigan Game	MI	SWAA	SW
Desert Challenge	DC	Mid-Atlantic	MA	Tri-State	TS
Dixie Games	DX	New England Games	NE	West Virginia Games	WV
Far West Games	FW	Northwest Games	NW	Great Lakes Games	GL
Ohio Games	OH	Other Qualifying Meet	OQ	Name of Meet: _____	

Track Events

Track Class: _____

Meet Code	Event(s)	Time	Meet Code	Event(s)	Time

Field Events **Field Classes:** **F (Shot)** _____ **FD (Discus, Club, Softball)** _____ **FJ (Javelin)** _____

Meet Code	Event(s)	Distance	Meet Code	Event(s)	Distance

Swimming Events **Swim Classes:** **S (Free, Butterfly)** _____ **SB (Breast)** _____ **SM (Medley)** _____

Meet Code	Event(s)	Time	Meet Code	Event(s)	Time

Table Tennis Events

Table Tennis Class: _____

Meet Code	Event	Score	Meet Code	Event	Score

Archery Events

Archery Class: _____

Meet Code	Event	Score	Meet Code	Event	Score

Weightlifting: **Weight Division:** _____ **Bench Press Qualifying Lift:** _____ **Powerlift Qualifying:** _____

CLASSIFICATION REVIEW REQUEST FORM

Athlete Name _____ **Birthdate** _____

Address _____

City/State/Zip/Country _____

Daytime phone _____ **Evening phone** _____

Email Address _____

Why are you requesting to be reclassified?

- Do not have a national classification**
- Must be re-classified at every major competition because of my disability characteristics**
- Have had a change in my medical status since my classification was last completed**

What is your current classification _____

Year in which you were classified _____

What is your disability: _____

List any changes in your functional status since your previous classification was completed. _____

Signature of person requesting the classification review

Relationship to athlete

Email Address

2004 National Junior Disabled Sports Championships

Athlete Medical Form

(To be completed by a Licensed Physician, Physician's Assistant or Nurse Practitioner)

Athlete Name: _____ **Age:** _____ **Disability:** _____ **Sex:** M F

Address: _____

Sports Participating In: _____

Family Physician: _____ **Contact Phone:** _____

Ht: _____ **Wt:** _____ **BP:** _____

General

Region Examined	Satisfactory			Comments
	Yes	No	Not Examined	
Eyes				
ENT				
Dental				
Chest				
Heart				
Abdomen				
Genitalia				
Skin				
Ortho				
Neuro				
Flex/Strength				

Follow-up recommendations: _____

Sports Participation approved: Yes No Restricted _____

Limitations: _____

Physician's Signature _____ Date: _____

Physician's Name (please print) _____ Address _____

City/State/Zip _____ Physician's Phone Number _____

ATHLETE MEDICAL FORM
(to be completed by the athlete/parent)

NAME (last, first) _____ **DOB:** _____ **AGE:** _____

Address _____ **City** _____ **State** _____ **Zip Code** _____

Home Phone # _____ **Emergency Phone #** _____

INSURANCE INFORMATION:

Insurance Company _____ **Policy Number** _____

Dental Insurance Company _____ **Policy Number** _____

DIAGNOSIS: _____ **SEX:** M F (circle one)

In case of emergency whom should we notify? _____

ALLERGIES (be specific):

Medications _____

Environmental/food/other _____ **Latex (yes/no)** _____

What are your symptoms from an allergic reaction? _____

CURRENT MEDICATIONS: _____

PAST SURGERIES: _____

Do you have a shunt in place? Y N (circle one)

Have you ever had a shunt malfunction? Y N (circle one)

If yes, what were the symptoms? _____

Have you ever had a tethered spinal cord? Y N (circle one)

If yes, what were the symptoms? _____

Have you ever been knocked out or had a concussion? Y N (circle one)

If yes, describe the incident. _____

Do you have any history of seizures? Y N (circle one)

Do you have a history of heart disease, heart murmurs, or high blood pressure? Y N (circle one)

Has anybody in your family had a sudden death or heart attack before 50 years? Y N (circle one)

Have you ever been dizzy or passed out with exercise? Y N (circle one)

Have you ever had any fractures, sprains, or strains (F=fracture, S=strain or sprain)?

Neck _____ Arm _____ Hip _____ Elbow _____

Back _____ Hand _____ Thigh _____ Knee _____

Shoulders _____ Fingers _____

Do you have scoliosis? Y N (circle one)

Have you had a back fusion? Y N (circle one)

Do you have any organs missing? Y N (circle one)

Specify: _____

Do you wear: glasses, contact lenses, hearing aides, or dental appliances ? (circle all that apply)

What type of bladder management do you use? (check all that apply)

None _____ Indwelling catheter _____ Intermittent catheter _____

Other (specify) _____

Have you had any recent (last 3 months) bladder infections? Y N (circle one)

Do you have any problems with constipation or loose stools? Y N (circle one)

Do you have any history of pressure ulcers requiring surgery? Y N (circle one)

Do you have any current pressure sores? Y N (circle one)

Where are they and how are you treating them?

1) _____

2) _____

What type of wheelchair cushion do you use? _____

Do you have any chronic illnesses? Y N (circle one & and specify) _____

Date of last tetanus shot. _____

Are your other immunizations up-to-date? Y N (circle one & if no, why) _____

Do you wear braces? Y N (circle one) What type? _____

How many hours per week do you train? _____

Do you have a coach? Y N (circle one) Who? _____

What sports do you participate in? _____

Do you have any problems with (check all that apply):

Overheating _____ Dysreflexia _____ Spasticity _____ Pain _____

Are any of the problems made worse by exercise? Y N (circle one & specify) _____

Are any of the problems made better by exercise? Y N (circle one & specify) _____

Permission is given to WSUSA or competition organizing committee to seek medical care in case of emergency for the above named person.

Signature _____

Date _____

Mesa Association of Sports for the Disabled Insurance Waiver and Release of Liability

Form 11

In consideration of being allowed to participate in any way in Mesa Association of Sports for the Disabled programs, related events, and activities, as well as those of any affiliated organizations, including Wheelchair Sports, USA; Disabled Sports, USA; National Disabled Sports Alliance; United States Association of Blind Athletes and others, I and/or the minor participant, the undersigned:

1. Agree that prior to participating, I will inspect, or if a parent and/or legal guardian, I will instruct the minor participant to inspect the facilities and equipment to be used, and if I believe anything is unsafe, I and/or the minor participant will immediately advise the Mesa Association of Sports for the Disabled of such conditions and refuse to participate.
2. Acknowledge and fully understand that I and/or the minor participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result only from my own actions, inactions, negligence of others, the rules of play, or the condition of the premises or any equipment used. Further, that there may be other risks not known to me or not reasonably foreseeable at this time.
3. Accept all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Release, waive, discharge and covenant not to sue the Mesa Association of Sports for the Disabled, it's affiliated organizations, their representative administrators, directors, agents, coaches, and other employees or volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and leasers of premises used to conduct the events, all of which are hereinafter referred to as "releasees", from demands, losses or damages on account of injury, including death or damage to property, cause or alleged to be caused in whole or in part by the negligence of the releasee or otherwise.
5. Agree to abstain from the use of alcohol and/or illegal drugs while participating in any event sponsored by the Mesa Association of Sports for the Disabled or it's affiliated organizations. Failure to adhere to this requirement will result in immediate removal and possible suspension.
6. Do hereby authorize, consent to and direct the Mesa Association of Sports for the Disabled to obtain a physician to render medical aid, perform operations and/or give treatment to me, in the case of an emergency, and do hereby consent to and authorize said physician to render any and all treatment that in his/her judgement may be necessary or advisable.
7. Understand that my participation or attendance at any Mesa Association of Sports for the Disabled activities or events constitutes permission to be photographed, videotaped or recorded for possible publicity or media purposes and constitutes a waiver of any and all claims for compensation from all sponsoring agencies.

I/we have read the above waiver and release and understand that I/we have given up substantial rights by signing this document and sign it voluntarily.

Participant's Signature

Participant's Printed Name

Date

If the participant is a minor and/or has a legal guardian:

Parent/Guardian Signature

Parent/Guardian Printed Name

Date

Athlete Biography Form

Form 12, Optional

This information will be used for press release information and bulletins to local news outlets and news outlets in the athletes' hometowns. This information is strictly optional.

Athlete Name _____ **DOB** _____ **Classification** _____

Address _____ **Gender:** **Male** **Female**

City _____ **State** _____ **Zip Code** _____

Contact Number _____ **E-mail Address** _____

Grade in School _____ **Name of School** _____ **Disability** _____

Team Name _____ **Coach's Name** _____

Coach's Phone _____ **Coach's Email** _____

List all sports you compete in:

List all events you have competed in during the last two years:

List all hobbies and interests:

List all awards/accomplishments you have received in the last two years:

List future goals:

Name of local newspaper _____ **Newspaper Email** _____

Additional Information:
