



**Paralyzed Veterans  
of America**



## 2018 Paralyzed Veterans of America Triathlon Camp

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Email: \_\_\_\_\_ Day Phone: \_\_\_\_\_

### What is your impairment? (Check all that apply)

- Amputee – Lower Limb
- Spinal Cord Injury
- Stroke/TBI
- PTSD
- Other: \_\_\_\_\_

### Are you a Military Veteran or a current Active Duty member?

- Yes
- No

If you answered yes, what branch of the Military? \_\_\_\_\_

### How would you classify your swimming ability? (Check one)

- Beginner (*Little or no race experience*)
- Intermediate (*At least two back to back seasons of race experience*)
- Advanced (*Multiple years of national or international level of competition/experience*)

### How would you classify your cycling ability? (Check one)

- Beginner (*Little or no race experience*)
- Intermediate (*At least two back to back seasons of race experience*)
- Advanced (*Multiple years of national or international level of competition/experience*)

### How would you classify your running/pushing ability? (Check one)

- Beginner (*Little or no race experience*)
- Intermediate (*At least two back to back seasons of race experience*)
- Advanced (*Multiple years of national or international level of competition/experience*)

**Have you ever participated in a triathlon or other multi-sport event?**

- Yes
- No

If yes, how many have you participated in? \_\_\_\_\_

If yes, what year was the most previous one you were in? \_\_\_\_\_

**What equipment do you plan on/can bring to the camp? (Check all that apply)**

- None
- Swim Goggles
- Bike Helmet
- Wetsuit
- Handcycle
- Racing Wheelchair
- Upright Bicycle

Please list any equipment items that you are unable to provide yourself: \_\_\_\_\_

\_\_\_\_\_

**Will you be bringing a service dog with you?**

- Yes
- No

**Please give a brief explanation on why you want to attend this camp.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please list and explain one of your goals while attending this camp.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please complete this application and email to [Gavin.Shulock@usatriathlon.org](mailto:Gavin.Shulock@usatriathlon.org)

Must be sent in by March 14<sup>th</sup>, 2018