



Summer 2020 – Junior Program -- ATHLETE INFORMATION (Please print)

Youth Last Name: _____ Youth First Name: _____

Youth Preferred Name: _____

Mailing Address: _____ City _____ Zip Code _____

Home Phone _____ Cell phone _____ Email address _____

School Attending in Fall: _____ Grade in Fall: _____ Date of Birth _____ Age _____

To help us correctly fit athlete's boat: Approximate Height: _____ Approximate Weight: _____

Athlete's Swimming Abilities:

I certify that my sculler can:

- | | | |
|---|-------|------|
| 1. Swim one length of the pool without help, any stroke | • yes | • no |
| 2. Tread water for 5 minutes | • yes | • no |
| 3. Swim under water without fear | • yes | • no |

OR

• **No, my sculler does not have those abilities. I and my sculler understand that he or she must always wear a life vest (supplied by DSC) on the water.**

Specific Medical, Behavioral or Developmental Needs

Is there anything about your child's health that we should be aware of? _____

Does your child have any allergies? Please describe any allergies and treatments: _____

Does your child take any medications? Please list any medications and doses taken. _____

Does your child require any dietary modifications? _____

As the Parent/Legal Guardian, do you feel your child is healthy enough to participate in sculling, which is a very physically demanding sport? • yes • no

Do you have any information to share about your child's behavioral or developmental needs which would require us to modify the learning environment? • yes • no

If yes, please specify: _____

Does your child have any previous sports experience? • yes • no

If yes, please specify: _____

PARENT/GUARDIAN INFORMATION (Please print)

Name of Parent/Guardian: _____ Relationship: _____

Home Address (if different from child): _____ City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Email address: _____

Emergency Contact if person named above is not available? _____

Home Phone: _____ Cell Phone: _____

Parent or Guardian Signature _____ Date _____