



# RACE 4 CHASE 2021

## Triathlon Program Application OCEAN COMMUNITY YMCA

**Race 4 Chase** is named for Chase Kowalski, an amazing little boy from Newtown, CT who loved to run. Race 4 Chase strives to empower kids to reach their full potential.

Registration is for children ages 6-12 wishing to participate in the Race 4 Chase Triathlon Program. This program provides youth with a fun, skill building, life-changing experience by introducing them to the sport of triathlon.

**This free program runs Monday-Friday from 8:30am-12:00pm at the Westerly-Pawcatuck branch. We'll serve a nutritious snack before and lunch after each practice. Practice begins Monday, July 5<sup>th</sup> and wraps up Friday, August 13<sup>th</sup>, culminating in the Race Day, which is Sunday, August 15<sup>th</sup> at Fort Adams State Park in Newport, RI. All participants will be eligible to compete in the Youth Triathlon, and will receive a program t-shirt, as well as a race day shirt and medal for completing the Race 4 Chase triathlon.**

This application needs to be completed by both the young athlete and their parent/guardian. One application per child. Forms are due 6/4/2021.

Due to limited enrollment, applications will be evaluated on several factors: first-time registration, a demonstration of need, and those indicating a sincere desire to participate for the complete duration of the program.

**PARENT SECTION:**

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ M / F (circle one)

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Home: \_\_\_\_\_

Please respond honestly so your child's needs can be fairly evaluated. Please describe your child's level and frequency of activity:

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What is your child's swimming ability? (circle)      **Beginner**      **Intermediate**      **Advanced**

What is your child's biking ability? (circle)      **Beginner**      **Intermediate**      **Advanced**

How would you describe your child's overall health?

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What are your child's favorite activities?

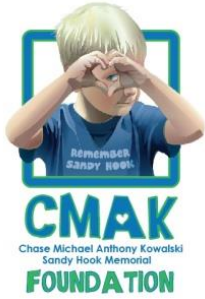
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How will your child benefit from participating in this program?

**YOUNG ATHLETE'S SECTION**

Why do you want to participate in the Race 4 Chase program?

What do you like to do for fun?



**2021 RACE 4 CHASE TRIATHLON PROGRAM REGISTRATION FORM**  
**July 5, 2021 – August 12, 2021 Monday-Friday, 8:30am-12:00pm**  
**Race Day: Saturday, August 15, 2021 @ Fort Adams State Park, Newport**

Parent Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Emerg Phone: \_\_\_\_\_

Participant Name: \_\_\_\_\_

DOB: \_\_\_\_\_ Shirt Size: \_\_\_\_\_ Gender: M F Grade: \_\_\_\_\_

Participant specifically assumes responsibility for all risk of injury arising from his/her presence on the premises of the Ocean Community YMCA, my child's use of its equipment or facilities, and my child's participation in activities, whether on its premises or at another location, and for my child and my heirs and assigns hereby waive, release, and agree to hold free from all claims for damages the Young Men's Christian Association and its officers, directors, members, employers, or agents. I understand the risks and dangers involved in participating in the programs and activities of the YMCA, and my child is physically capable of participating in such programs and agree not to participate in any activity that may injure themselves or others. My signature also indicates my permission to use any pictures or any other media for promotional purposes. **I give my child permission to participate in all Race 4 Chase designated field trips.**

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_