Form 9
2017 Adaptive Sports USA Junior Nationals™
Team Information Form
(This form is to be completed by the Head Coach Only)

Team Name:_____	**Coach's Name:**_____
Contact Cell #:_____	**Contact Email:**_____

Arrival Information:

☐ By Airline

☐ By Car/Bus

Arrival Date _____

Departing Date _____

Please print clearly in alphabetical order: Athletes first then coaches and then other registrants. Do not list parents or others that are not registering for the event.

Last Name, First Name	**A/RHC/AC/P/SS** Athlete (A) / Registered Head Coach (RHC) Assistant Coach (AC) / Parent (P) Support Staff (SS)	**Adaptive Sports USA Membership #** **IPC Passport ID# (if available)**