



ATHLETE'S INFORMATION

Please return by December 7, 2019

- Full Name: _____
- Address: _____
- Home Phone: _____ Cell Phone: _____
- Email address: _____
- Date of birth (yyyy/mm/dd): _____
- Emergency contact person: _____
- Emergency contact phone number/email address: _____

Parent/Guardian 1

- Full Name: _____
- Address: _____
- Home Phone: _____ Cell Phone: _____
- Email Address: _____

Parent/Guardian 2

- Full Name: _____
- Address: _____
- Home Phone: _____ Cell Phone: _____
- Email Address: _____

Any health issue we need to be aware of? _____

- Where will you be living Summer 2020? _____
- Are you working or in school? now: _____ after September 2020: _____
- Do you have access to a swim, bike or run club? _____
- Are you currently training with a swim, bike or run club? _____

- If yes, what is the club name and coach's name: _____
- Have you ever participated in a triathlon?: _____
- Do you currently have a road bike? _____ Make and model: _____
- Do you have a triathlon wetsuit? _____
- Do you have a triathlon goal/race in 2020? _____
- Do you have any open water swim experience? _____
- What swim experience do you have? (competitive swimming, freestyle race times/distances, open water swim experience) _____

What cycling experience do you have? (outdoor riding, indoor training, equipment used: heart rate monitor/power meter, races) _____

What running experience do you have? (track/road running races, best times/distances, track/cross country teams) _____

- Do you keep a training log? _____
- What other sports are you involved with? _____
- How much time do you have to train each week? _____
- Are you currently following a training plan? _____
- If so, please give details of your plan:

- Comments

Thanks so much for your information. It will help us help you train better.

Canada Summer Games Coaching Team

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