



**Naugatuck YMCA
Race4Chase
Program Application**



Parent section: Previous Participation (Y/ N) Age (As of 12/31/19) _____

Child's Name _____ Birth Date ____/____/____ Sex (M/F) ____

Address _____ City _____ Zip _____

Parent's Name _____ Cell phone # _____

Email _____ Home phone # _____

Will your child be able to participate in training every day? (Y/ N)

Honestly respond to the following questions so your child's needs will be fairly evaluated. Please describe your child's activity level and frequency:

What is your child's swimming ability (please check)

_____ Beginner _____ Intermediate _____ Advanced

What is your child's biking ability (please check)

_____ Beginner _____ Intermediate _____ Advanced

How would you describe your child's overall health?

What are your child's favorite activities?

How will your child benefit from participating in this program?

Child's section to answer: Child should write the answers and parents can help spell if needed.

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

What do you like to do for fun?
