



U.S. AIR FORCE

2012 Air Force Warrior Games Athlete Application Form

Archery, Basketball, Cycling, Shooting, Swimming, Track, Field, Volleyball
Ultimate Warrior



****Paralympians (those who have competed at a Paralympic Games) or Elite/National team service members past or present or anyone who has competed internationally for US Paralympics are NOT eligible for the Warrior Games

GENERAL INFORMATION

Name, as appears on ID	Last:	First:	Middle:	Preferred Name:
<input type="checkbox"/> Male <input type="checkbox"/> Female	DOB:	Last 4 digits of SSN:	Home of Record:	
Mailing address:				
P.O. Box:	City:	State:	ZIP Code:	
Physical Address:				
Street:	City:	State:	ZIP Code:	
Primary Email:	Mobile Phone:	Duty Phone:		
Duty Location/VA Center:				
Emergency Contact:	Phone:	Relation:		

Check one or all that apply:

- Upper body Impairment
- Lower body Impairment
- Traumatic Brain Injury
- Spinal Cord Injury
- PTSD
- Other (Please Explain in comment section below)

Please specify disability (i.e. above knee; below elbow; TBI-Percentage of use in arms, legs, right & left side; C3):

Date of Disability: _____ Cause of Disability: _____

Wheelchair User? Yes No Do you use a power chair? Yes No

Do you need assistance when transferring? Yes No Do you require a shower chair? Yes No

Do you require first floor access with handicap accessible room? Yes No

Any special dietary restrictions? Yes No Explain: _____

Do you **require** a non-medical attendant? Yes No

Please specify uniform sizes:

T-shirt size small medium large X large XX Large XXX Large XXXX Large

Shorts size small medium large X large XX Large XXX Large XXXX Large

Warm-up size small medium large X large XX Large XXX Large XXXX Large

MILITARY INFORMATION

Service status: _____

Rank: _____

Please check all that apply: Operation Enduring Freedom Operation Iraqi Freedom Other, please list: _____

Are you an AFW2 Airman? Yes No

Are you a Care Coalition Special Operator? Yes No

Do you have a Recovery Care Coordinator? Yes No Name: _____

Did you compete in the 2011 Warrior Games? Yes No

SPORTS INFORMATION

Individual Events: Check the **two or three** individual events that you are interested in competing in **OR** check the Ultimate Warrior:

Men's Events

- Track** 100M 200M 400M 1500M
- Field** Standing Shot Sitting Shot Standing Discus Sitting Discus
- Swimming** 50M Free 100M Free 50M Backstroke 50M Breaststroke

Women's Events

- Track** 100M 1500M
- Field** Standing Shot Sitting Shot
- Swimming** 50M Free 50M Backstroke

Combined Events (Male/Female) (If there are enough women signed up will conduct a women's division only)

- Archery** Open Compound Open Recurve
- Cycling** Up Right Recumbent Hand Cycle
- Shooting** 10M Air Pistol(SH1 & PTSD) 10M Air Rifle Standing(SH1 & PTSD) 10M Air Rifle Standing(SH2 & PTSD)
 10M Prone Air Rifle (SH1 & PTSD) 10M Prone Air Rifle (SH2 & PTSD)

Ultimate Warrior

Ultimate Warrior Events: Track (100 M), Swim (50 M Free), Shoot (10 M Air Rifle), Track (1500 M), Field (Shot)

Please list two alternate event choices.

1st Alt. Choice: _____

2nd Alt Choice: _____

Team Events: Circle the team event you are interested in. Teams will be formed as part of the athlete selection process.

Swimming relay 200 M Free—(Maximum of 2 coed relay teams per warrior games platoon. It is each Services choice to enter 1 or 2 relay teams, teams do not need to be selected ahead of time)

Volleyball – Each service will enter a 12-person team in the Sitting Volleyball Tournament

Wheelchair Basketball -Five Wheelchair Basketball Teams will be fielded for a competition.

ADDITIONAL INFORMATION/COMMENTS

Qualification/Experience Information Sheet
2012 Warrior Games, Colorado Springs, CO

Please complete the following information for all events which you are nominated, be as detailed as possible.

Name	Last:	First:	Phone:	Email:
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Shooting

- Military weapons qualification level _____ (*please provide copy of most recent qualification)
- Describe shooting experience: (include competitive experience, military or civilian courses completed, air pistol experience, air rifle experience, etc.)

Swimming

- Provide competition results and/or training times if available:
50M Free _____ 100M Free _____ 50M Back _____ 50M Breast _____
- Describe swimming experience: (include recreational, high school, college, and/or competitive experience)

Archery

- Provide competition results and/or training scores if available: _____ Type of bow used _____
- Describe archery experience: (include recreational, high school, college, and/or competitive experience)

Cycling

- Provide competition results and/or training times if available:
Distance (10-12 miles) Up Right _____ Recumbent _____ Hand Cycle _____
- Describe cycling experience: (include recreational, high school, college, and/or competitive experience)

Track & Field

- Provide competition results and/or training times if available:
100M _____ 200M _____ 400M _____ 1500M _____
- Provide competition results and/or training distance if available: Shot _____ Discus _____
- Describe track & field experience: (include recreational, high school, college, and/or competitive experience)

Volleyball

- Describe sitting volleyball experience: (include recreational and/or competitive experience)
- Describe standing volleyball experience: (include recreational, high school, college, and/or competitive experience)

Basketball

- Describe wheelchair basketball experience: (include recreational and/or competitive experience)
