



Extreme Abilities

**Adapted Surfing Day Application Form
16 November 2014 and 7 December 2014**

Please complete this form if you are participating. This information will add to your own safety and maximum enjoyment in your participation to the event.

Name and Surname:

ID Number:

Email Address:

Cell phone Number:

Address:

Disability:

(State disability and specifics eg: *Spinal Cord Injury, T8 Complete*)

Special needs and assistive devices:

(Use of wheelchair, crutches etc.)

Medical Concerns:

(Do you have any pressure sores, open wounds etc? Describe)

Current Medication:

Dietary preferences:

(Diabetic, Vegetarian etc.)

General clothing size:

(Sizes need for wetsuit fitting. Wetsuits are necessary for buoyancy and resistance against cold water)

Contact Person in case of emergency:

Name:

Contact number:

Were you part of previous Adapted Surfing events?

YES

NO

Other Concerns:
