



# Adaptive Reconditioning Event Registration



Are you currently enrolled in the Navy Wounded Warrior (NWW) Program?

Yes. Please continue completing the registration.

No. **STOP**, do not complete this registration. Please speak to a NWW staff member who will work with you to complete the necessary referral paperwork for enrollment consideration.

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Please print all information on this registration.

### Event Information \*NWW Headquarters Use ONLY\*

Event Name:	<b>Adaptive Sports Camp</b>
Event Location:	<b>NBVC Pt. Hueneme, CA</b>
Event Dates:	<b>9-15 January 2022</b>

### Personal Acknowledgement

Yes, I plan to attend. My signature on this document indicates my written commitment and interest in attending this NWW hosted adaptive reconditioning event. I understand this is ONLY a registration to participate and I will be formally informed in writing if selected to attend.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Personal Information

Name: \_\_\_\_\_

Rank:	Rate or Designator:	Active or Reserve:	Retired (TDRL/PDRL/Other):
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Current Address: \_\_\_\_\_

City:	State:	Zip:
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Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Clothing Sizes (unisex S/M/L):		Categories (Select all that apply):		Sports (Select all that apply):	
Height:	Weight:	Amputee		Archery	
Shirt		Illness		Cycling	
Pants		PTSD		Golf	
Sweatshirt		Spinal Cord Injury		Shooting	
Jacket		Traumatic Brain Injury		Wheelchair Basketball	
Airport Preference	Airport Code, City	Visual Impairments		Wheelchair Rugby	
1 <sup>st</sup> Choice		Other			
2 <sup>nd</sup> Choice					

### \*NWW Headquarters Use ONLY\*

TWMS Case Number:			
<b>Registration Status</b>			
Date Received at HQ:	HQs Decision and Date:	Date RSM notified:	
		Date documented in TWMS:	
Comments/Reason:			