



**PARALYMPIC TALENT SEARCH  
REGISTRATION FORM**

Please complete one form per person

**EVENT : St Joseph's Nudgee College, 16<sup>th</sup> May QLD**

**CONTACT INFORMATION:**

Name:	Contact Number:
Contact Address:	Postcode:
Email Address:	Date of Birth:
Emergency contact person & phone number:	
How did you hear about this event?	
Occupation:	
If student, what school/university do you attend?	
If under 18 years of age please state the name of a parent/guardian?	

**ABOUT YOU:**

What is your disability/ies?

Will you be using a wheelchair for this event?  No  Manual  Electric

What sports do you currently play (if any)?

If applicable, which events?

At what level do you play/compete?

Are you a member of any sporting clubs? Please list them:

What do you like about playing sport?

Have you previously been classified?  Yes  No

If yes, in which sport & what is your classification?

Have you snow skied before?  Yes  No

Are you interested in alpine or cross country skiing?  Yes  No

What sports specific testing would you like to undertake?

Athletics  Archery  Boccia  Equestrian  Fencing  Cycling  Goalball  Judo  Powerlifting  
 Rowing  Sailing  Shooting  Soccer  Swimming  Table Tennis  
 Wheelchair Basketball  Volleyball  Wheelchair Tennis  Wheelchair Rugby  Winter Sports

If you do not want to receive further information from the APC, please tick box

Please return this registration form to:  
Andrea Johnstone  
Australian Paralympic Committee  
GPO BOX 951, BRISBANE, QLD, 4001

Ph: 07 3551 1705  
Fax: 07 3217 5573  
Email: [andrea.johnstone@paralympic.org.au](mailto:andrea.johnstone@paralympic.org.au)

\*Please ensure that you have read the "Fact Sheet" for information on the day, including what to bring. If you have any questions, please contact Andrea Johnstone on the details above.