

Team USA Athlete Sports Information Form

XXI World Transplant Games Malaga, Spain

Your Response Needed by Thursday, April 6th

Enter your information in this form--when complete, email to teamusa.worldgames@gmail.com Or print this form, when completed, please scan and email to teamusa.worldgames@gmail.com or fax to 813-636-8122

Every Team USA athlete is asked to complete this sports form which will assist team management in servicing team needs.

Name:	Age Group
Registration Confirmation #:	

Please list your sport selections here (maximum of 5, not including relays in Swimming or Track and Field):

	Event	If Doubles or Pairs, list Partner or Indicate "NEED PARTNER"	Experience Level (years played, average, handicap, etc.)
1.			
2.			
3.			
4.			
5.			

If you have entered volleyball or basketball, please complete the other side of this form.

Name: _____

Volleyball:

In which levels have you recently participated (last 4 years)--check all that apply):

□ None	□ High School	College	Colleg	ge Intramural	□ Recreation or Sports Club/etc	
U.S. or World Transplant Games Other						
Awards, Medals, Honors, or Distinction:						
Are you cu	rrently playing on a	a team? 🗆 Ye	s □No	lf yes, descri	be:	

3on 3 Basketball:

In which levels have you recently participated (last 4 years)--check all that apply):

□ None	□ High School	College	College In	ıtramural	□ Recreation or Sports (Club/etc	
□ U.S. Transplant Games □ Other							
Awards, Medals, Honors, or Distinction:							
Are you currently playing on a team? Yes No If yes, describe:							