

# **UCSD JUNIOR ROWING CAMP QUESTIONNAIRE**

**Please print or write clearly**

Name: \_\_\_\_\_ Email Address \_\_\_\_\_

T-Shirt Size (Men's): \_\_\_\_\_ Shoe Size: \_\_\_\_\_ Height \_\_\_\_\_ Date of Birth \_\_\_\_\_

Are you coming with a friend? \_\_\_\_\_ Their name: \_\_\_\_\_

Do you have any allergies? \_\_\_\_\_ If yes, what? \_\_\_\_\_

Do you have any special eating needs? \_\_\_\_\_

Parent/Guardian Emergency Contact Number: (day) \_\_\_\_\_

## **PREVIOUS EXPERIENCE**

How many years of sweep rowing experience do you have, if any? \_\_\_\_\_

How many years of sculling experience do you have, if any? \_\_\_\_\_

Coach and Club, if experienced: \_\_\_\_\_

School: \_\_\_\_\_

What do you hope to learn from this camp? (if you need more space please feel free to use another page):

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