

## OFSAA Cross Country (V2023)

### PARA X-C REGISTRATION FORM

**PLEASE NOTE:** PARA athletes are to be entered by the Association Convenor

**PLEASE NOTE:** Schools MUST COMPLETE & UPLOAD THIS FORM TO THE HUB (BRING A HARD COPY TO OFSAA)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

School Attending: \_\_\_\_\_ Association: \_\_\_\_\_

Grade: \_\_\_\_\_ Gender: \_\_\_\_\_ Coaches Name: \_\_\_\_\_

Contact # (School): \_\_\_\_\_ Contact # (mobile – race day): (\_\_\_\_\_) \_\_\_\_\_

**Para category:** Please Check the correct Para division for the athlete.

Division	Check	Brief Description
II (intellectual Impairment)		Athletes with an IQ of 75 or less
VI (Visually Impaired)		Athletes with significant visual impairment
Amb. (Ambulatory)		Athletes who can compete standing up AND have: - CP, brain injuries, NM disorders - Loss or limited use of lower limbs - Loss or limited use of upper limbs - Dwarfism

Support required at OFSAA (a guide must be supplied by home school): \_\_\_\_\_ (Y/N)

**Please note:** If your Association hosts a Para Division race, the expectation is that your Para athlete(s) compete in it. If they choose to compete in an age division race at their Association meet, BUT wish to compete in the Para Division at OFSAA, it's the responsibility of the coach to ensure that the Association is aware of this so that the athlete is entered into the Para race for OFSAA.

Upload this form to the HUB

Best time for 4km run: \_\_\_\_\_

**Please note:** for safety and logistical purposes, athletes need to be at (or near) the 45 minute standard for this distance.

\_\_\_\_\_  
Coaches Signature

\_\_\_\_\_  
Date