

Registration Deadline: 23 January



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.

Please print all information on this registration. Event Information *NWW Headquarters Use ONLY* **Event Name: Navy Team Trials** NAS North Island, CA **Event Location:** 23 MAR – 6 APR 2025 **Event Dates:** 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: Retired (TDRL/PDRL/Other): Rate or Designator: Active or Reserve: Current Address: City: State: Zip: Phone Number: Email Address: **Sports (Select 4-8 Sports):** Clothing Sizes (unisex S/M/L): Categories (Select all that apply): Height: Weight: Archery Amputee Shirt Illness Cycling **Command Information** PTSD Field Current Command Spinal Cord Injury **Indoor Rowing** Command Location Traumatic Brain Injury Powerlifting **Airport Preference** Airport Code, City **Visual Impairments** Shooting 1st Choice Sitting Volleyball Other 2nd Choice Swimming Track Wheelchair Basketball Wheelchair Rugby *NWW Headquarters Use ONLY* TWMS Case Number: **Registration Status HQs Decision and Date: Date RSM notified: Date Received at HQ:**

Date documented in TWMS: