Race 4 Chase is named for Chase Kowalski, an amazing little boy from Newtown, who loved to run. Race 4 Chase strives to empower kids to reach their full potential.

Registration is for children ages 5-13 years old wishing to participate in the Race 4 Chase Triathlon Program. This program provides youth with a fun, skill building, life-changing experience by introducing them to the sport of triathlon.

This free program runs for 6 weeks beginning Monday, June 22, 2020 and ending Saturday, August 1, 2020. Program times are 8:00 a.m. – 1:30 p.m. daily, Monday – Friday. Race day is the culmination of the program for the YMCA Race 4 Chase programs at YMCA Camp Sloper in Southington (1000 East Street, Southington CT) on Saturday, August 1, 2020. All participants will compete in a Youth Triathlon on this day.

This application needs to be completed by both parent/guardian and child wishing to participate in the program. Please answer all questions; if you have additional children, each child must have a separate application. See Page 2 (back) for application.

Due to limited enrollment, applications will be evaluated based on several factors. Selection priority will be given to first time registrations, a demonstration of need, and those indicating a sincere desire to participate for the complete duration of the program.

You will be notified if your child has been selected into the program. If selected, completion of a registration packet is required.

Deadline applications are due back no later than April 8th, 2020 to:
Lisa Roger, NHA CNI Choice Neighborhoods at
149 Water Street, 2nd Floor, Norwalk CT 06854
Or email lroger@norwalkha.org

No extensions will be considered.

Race 4 Chase funding made possible by the Chase Michael Anthony Kowalski Foundation
Parent section:

Childs Name ____________________________ Birth Date ___/___/___ Sex (M/F) _____
Address _____________________________ City ________________ Zip _______
Parents Name ____________________________ Cell phone # ____________________
Email ___________________________ Home phone #_____________________

Honestly respond to the following questions so your child’s needs can be fairly evaluated. Please describe your child’s activity level and frequency:

_________________________________________________________________________
_________________________________________________________________________

What is your child’s swimming ability (please check)

_________ Beginner ___________ Intermediate ___________ Advanced

What is your child’s biking ability (please check)

_________ Beginner ___________ Intermediate ___________ Advanced

How would you describe your child’s overall heath?

_________________________________________________________________________

What are your child’s favorite activities?

_________________________________________________________________________

How will your child benefit from participating in this program?

_________________________________________________________________________

_________________________________________________________________________

Child’s section to answer. Parents can help write and spell if needed.

Why do you want to participate in the Race 4 Chase program?

_________________________________________________________________________

________________________________________

What do you like to do for fun?

_________________________________________________________________________