

# SPORTS ELIGIBILITY FORM

## PARTICIPANT INFORMATION

\_\_\_\_\_ (participant name) has expressed interest in participating in Prairie Grit Adaptive Sports, a nonprofit organization with a mission of providing sports and recreational opportunities for youth and adults living with physical and mental disabilities to enhance their quality of life. Prior to participating, we require a medical professional's confirmation that this individual is eligible for enrollment in our programs, as well as a basic health summary that will be used for safety and accommodation purposes.

## MEDICAL PROFESSIONAL USE ONLY

Participant's Name :

Date of Birth :

 /  / 

Height/Weight :

Diagnosis/Condition :

### Qualifying Primary Disability and/or Diagnosis:

Prairie Grit Adaptive Sports uses these guidelines to establish eligibility for our programming and services. Qualifying disabilities and/or specific diagnoses must be confirmed by a medical expert on the PGAS Eligibility Approval Form.

*Physical disability such that adapted accommodations, teaching approach, or adaptive equipment is required for individuals to participate in sports or recreational activities. The disability must consistently prohibit the individual from playing mainstream sports. Examples may include but are not limited to: those who use mobility aides (walker, wheelchair, crutches, canes), limited or no use of an extremity or extremities as well as hearing and vision impairments. Diagnoses such as: spina bifida, cerebral palsy, muscular dystrophy, spinal cord injury, blindness, or amputation for example.*

*Developmental/Intellectual/Cognitive Impairment such that adapted accommodations, teaching approach, or adaptive equipment is required for individuals to participate in sports or recreational activities. The impairment must consistently prohibit the individual from playing mainstream sports. Examples may include, but are not limited to: autism, Down syndrome, traumatic brain injury, genetic disorders, non-specific developmental delays.*

*Sensory processing disorders such that adapted accommodations, teaching approach, or adaptive equipment is required for individuals to participate in recreational activities. These disorders alone (without at least one of the above in addition) do not meet the minimum requirement for participation in competitive sled hockey tournaments.*

In your opinion, do you believe applicant to be eligible for Prairie Grit Adaptive Sports programming?

Yes  No

Please continue on other side

# MEDICAL PRECAUTIONS

YES NO

**Does the applicant have asthma?**

How are the applicant's asthma attacks treated?

**Does the applicant have any allergies?**

Please list all allergies

How are allergies treated?

**Does the applicant have diabetes?**

How are the applicant's diabetic episodes treated?

**Does the applicant have seizures?**

How are the applicant's seizures treated?

**Does the applicant have a shunt?**

Describe shunt type and location.

**Does the applicant have a gastrostomy tube?**

**Does the applicant have a catheter?**

**Does the applicant have a heart condition?**

Describe treatment or medications.

**Does the applicant have a history of bone or joint disorders?**

Describe treatment or medications.

**Has the applicant experienced a spinal cord injury or fusion?**

Please describe location, precautions

**Does the applicant have Chiari Malformation?**

To the best of my knowledge, the above information provided here is correct. I understand that this information will be used to determine if this individual is eligible for Prairie Grit Adaptive Sports programming and to ensure they are safe, and accommodations are met when engaging in our programs.

Medical Professional's Signature

Medical Professional's Printed Name

Please return to Prairie Grit Adaptive Sports | EMAIL: [krystal@prairiegritsports.com](mailto:krystal@prairiegritsports.com) | FAX: 701.838.1630

*This information will be used by staff at Prairie Grit Adaptive Sports to meet the needs of the participant to successfully participate in adaptive sports. This information will not be shared without your written consent.*