

2009 Clinic Participation and Experience Survey Form

Submit a completed a copy of this form for EACH student.

Please be candid and accurate concerning your paddling skills. This survey information will be used to place you into the appropriate skill level group for the clinic with other paddlers whose abilities are similar to yours.

The Youth Clinic has its own required forms that are available at www.threerivers.org. Participants must be at least 6 yrs old. **If you do not have internet access and cannot download Youth Clinic Forms, please contact: Laurie Haugh at 724-454-8028 for Youth Clinic Forms.**

Student's Name: _____	Age: _____	Boat Type: _____	Dinner Assistance (This section for Turkey Bash only):
Phone Number: _____	E-mail: _____	<input type="checkbox"/> Kayak (K1) model- _____ <input type="checkbox"/> Decked Canoe (C1 or C2) <input type="checkbox"/> Solo Open Canoe (O1) <input type="checkbox"/> Tandem Open Canoe (O2)	<input type="checkbox"/> Help Cook Dinner <input type="checkbox"/> Help After Dinner W Cleanup <input type="checkbox"/> Dessert Bake-off Participant <input type="checkbox"/>
If you participated in a previous clinic, who was your last instructor? _____			

Indicate the NUMBER OF DAYS that you spent paddling (in the type of boat you will be using) on each of the following kinds of water during the past year:

_____ Flat Water, such as lakes and reservoirs	_____ Class III Rivers, Lower Yough or Mile on Slip
_____ Class I Rivers, such as the Upper Allegheny River	List most difficult rivers run and water levels: _____
_____ Class II Rivers, such as the Middle Yough (from Confluence to Ohio pyle)	_____

CHECK THE RESPONSE THAT BEST APPLIES (for the boat you will be using at the clinic); ONE ANSWER PER QUESTION:

A. SWIMMING ABILITY:	<input type="checkbox"/> Non-Swimmer	<input type="checkbox"/> Weak Swimmer	<input type="checkbox"/> Average Swimmer	<input type="checkbox"/> Strong Swimmer
B. PHYSICAL ACTIVITY PER WEEK:	<input type="checkbox"/> Less than 1 Hour Aerobic Exercise	<input type="checkbox"/> 1 to 2 Hours Aerobic Exercise	<input type="checkbox"/> 2 to 4 Hours Aerobic Exercise	<input type="checkbox"/> More than 4 Hours Aerobic Exercise
C. CONFIDENCE:	<input type="checkbox"/> Uncomfortable in and around water	<input type="checkbox"/> Comfortable in a swimming pool	<input type="checkbox"/> Comfortable in action water sports	<input type="checkbox"/> Willing to take risks in water activities

1. BOAT CONTROL:	<input type="checkbox"/> No experience or can keep boat straight in flat water	<input type="checkbox"/> Can maneuver in Class I water to avoid obstacles	<input type="checkbox"/> Can maneuver in Class II water; can work in current	<input type="checkbox"/> Can maneuver in Class III water; can play in Class II holes and waves
2. EDDY TURNS:	<input type="checkbox"/> No experience	<input type="checkbox"/> Can make eddy turns with difficulty	<input type="checkbox"/> Can make eddy turns in Class II water	<input type="checkbox"/> Can make eddy turns in Class III water
3. FERRYING:	<input type="checkbox"/> Cannot ferry	<input type="checkbox"/> Can ferry in Class I water	<input type="checkbox"/> Can ferry in Class II water	<input type="checkbox"/> Can ferry in Class III water
4. PADDLE STROKES:	<input type="checkbox"/> No paddling experience	<input type="checkbox"/> Knows basic strokes (Forward/Reverse/Sweep/ Draw)	<input type="checkbox"/> Comfortable executing basic strokes on Class II water (knows bracing/sculling)	<input type="checkbox"/> Comfortable executing basic strokes on Class III water (knows duffek/crossdraw)
5. WATER READING:	<input type="checkbox"/> Little or no experience	<input type="checkbox"/> Can recognize basic river features (eddies, holes, waves, V's, etc.)	<input type="checkbox"/> Can plan routes in Class II rapids	<input type="checkbox"/> Can plan routes in Class III rapids
6. BRACING:	<input type="checkbox"/> No experience	<input type="checkbox"/> Inconsistent brace	<input type="checkbox"/> Solid brace in Class II water	<input type="checkbox"/> Solid brace in Class III water
7. RESCUE ABILITY:	<input type="checkbox"/> No exit skills	<input type="checkbox"/> Can safely exit from capsized boat in current	<input type="checkbox"/> Can self-rescue in Class II water	<input type="checkbox"/> Can self-rescue in Class III water; can assist others in Class II water
8. ROLLING:	<input type="checkbox"/> No roll	<input type="checkbox"/> Pool roll (3 out of 4 times)	<input type="checkbox"/> River roll in Class II water (4 out of 5 times)	<input type="checkbox"/> River roll in Class III water (4 out of 5 times)
9. AGGRESSIVENESS:	<input type="checkbox"/> No experience	<input type="checkbox"/> Plays on familiar rivers	<input type="checkbox"/> Plays on most rivers; explores new routes	<input type="checkbox"/> Plays a lot; works rivers long and hard

List any physical limitations or medical conditions that apply to you; such as allergies, diabetes, epilepsy, etc:

Other comments / requests: