



## 2025 Race4Chase Triathlon Program Application

**Race4Chase** is named for Chase Kowalski, an amazing little boy from Newtown, who loved to run. Race4Chase strives to empower kids to reach their full potential.

Registration is for children ages 6-12 years old wishing to participate in the Race4Chase Triathlon Program. This program provides youth with a fun, skill building, life-changing experience by introducing them to the sport of triathlon.

This program runs for 6 weeks beginning Monday, June 23, 2025 and ending Saturday, August 2, 2025. Program times are 9:00 a.m. – 12:30 p.m. daily, Monday – Friday. Race day is the culmination of the program for the YMCA Race4Chase programs at YMCA Camp Sloper in Southington (1000 East Street, Southington CT) on Saturday, August 2, 2025. 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.

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 28, 2025  
No extensions will be considered.**

*Race4Chase funding made possible by the  
Chase Michael Anthony Kowalski Foundation*

More about CMAK



More about the  
Race4Chase Tri Program



## Parent section:

Childs Name \_\_\_\_\_ Birth Date \_\_\_/\_\_\_/\_\_\_ Sex (M/F/ Non-Binary) \_\_\_\_\_

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:

\_\_\_\_\_  
\_\_\_\_\_

T-shirt Size: (Circle One) **Youth-** S / M / L **Adult-** S / M / L / XL **Other:** \_\_\_\_\_

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 health?

\_\_\_\_\_

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 Race4Chase program?

\_\_\_\_\_

\_\_\_\_\_

What do you like to do for fun?

\_\_\_\_\_