# ATHLETE BIOGRAPHY FORM

Bib Number (for office use) _____ _____ _____ _____
Day 1 Day 2 Day 3 Day 4

Name:_____Nickname:_____

Is your birthday during the Championships? If so, when? _____Age: _____

Birthplace: _____Hometown:_____

School: _____

Major Sponsors: _____

Home Ski Area: _____

Home Club: _____ Coach: _____

Age when you started skiing: _____Age when you started competing: _____

What's your favorite event? _____

Where is your favorite place to ski? _____

Who do you most look up to? _____

What's the one thing you must travel with? _____

What are your superstitions or rituals? _____

_____

What are the results you're most proud of this season (location/place/etc)?

_____

_____

Anything else you would like to tell us? _____

_____

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The information you provide here may be used by our announcers during the event and our commentator for the live video feed.

Please send this back to WPCCEvents@winterparkresort.com via email, 970.726.1690 via fax or bring in when you come into register at Race Headquarters.