

Walton Foundation for Independence

Adaptive Sport/Leisure Interest Assessment

Name: _____

Email: _____

Phone Number (optional): _____

Zip Code: _____

Please circle any adaptive sport/leisure interests below that you would like to participate in or would like to see in your area in the near future!

Adaptive Cycling

Swimming

Adaptive Golf

Trap Shooting

Adaptive Water Sports
(Water Ski, Tubing, Kayaking, etc.)

Wheelchair Basketball

Archery

Wheelchair Rugby

Bowling

Wheelchair Tennis

Fishing

Other: _____

Please return completed forms to katiei@waltonfoundation.net
or Katie Iocona, Walton Foundation for Independence,
523 13th St., Augusta, GA 30901