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2018 USPA National Skydiving Championships Competitor Information

Please provide the following information so that USPA may send press releases on the USPA Nationals to national and local media outlets:

Name:
USPA membership #:
Team name:
Discipline/event:
Date of birth:
Home DZ:
Total # of jumps:
Year of first jump:
Hometown:
Name of hometown newspaper (if known):
Current city:
Name of current city newspaper (if known):
Occupation:
Employer:
E-mail address:
Cell phone #:
May we give your contact info to members of the media interested in interviewing you? \Box Yes \Box No