



REG. DATE / OFFICE USE ONLY

REGISTRATION DATE grid

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

Registration form fields: LAST NAME, LEGAL FIRST NAME, MIDDLE NAME

Have you ever been a member of USA Swimming under a different last name? If yes, please provide that name:

Previously registered with USA Swimming? Yes No If registered in a different LSC, which LSC:

Registration form fields: PREFERRED NAME, DATE OF BIRTH (MO/DAY/YR), SEX (M-F), CLUB CODE, CLUB NAME

(Required)

MAILING ADDRESS

MAILING ADDRESS field

Registration form fields: CITY, STATE, ZIP CODE

Registration form fields: HOME, WORK, FAX, CELL telephone numbers with area codes and extensions

E-MAIL ADDRESS field

CHECK ALL THAT APPLY:

- 1. Coach-Full Time (primary income is from coaching) Coach-Part Time (primary income is NOT from coaching) Official Other

COACHES - Provide proof of the following current safety certifications: CPR, First Aid and Safety Training for Swim Coaches

NOTE - All coaches must have a current USA Swimming background screen

First year coaches must meet the education requirement before renewing for the second year

- 2. If coach, primary age group that you coach (may be more than one): 10-Un 11-12 13-14 15-18 19+ Masters
3. Race and Ethnicity: Q. Black or African American R. Asian S. White T. Hispanic or Latino U. American Indian & Alaska Native V. Some Other Race W. Native Hawaiian & Other Pacific Islander

IF FAMILY MEMBERSHIP, PLEASE COMPLETE THESE LINES FOR THE SECOND NON-ATHLETE FAMILY MEMBER:

Registration form fields for second family member: LAST NAME, LEGAL FIRST NAME, MIDDLE NAME

Have you ever been a member of USA Swimming under a different last name? If yes, please provide that name:

Previously registered with USA Swimming? Yes No If registered in a different LSC, which LSC:

Registration form fields for second family member: PREFERRED NAME, DATE OF BIRTH (MO/DAY/YR), SEX (M-F), CLUB CODE, CLUB NAME

(Required)

Registration form fields for second family member: WORK, FAX, CELL telephone numbers with area codes and extensions

E-MAIL ADDRESS field for second family member

CHECK ALL THAT APPLY:

- 1. Coach-Full Time (primary income is from coaching) Coach-Part Time (primary income is NOT from coaching) Official Other

COACHES - Provide proof of the following current safety certifications: CPR, First Aid and Safety Training for Swim Coaches

NOTE - All coaches must have a current USA Swimming background screen

First year coaches must meet the education requirement before renewing for the second year

- 2. If coach, primary age group that you coach (may be more than one): 10-Un 11-12 13-14 15-18 19+ Masters
3. Race and Ethnicity: Q. Black or African American R. Asian S. White T. Hispanic or Latino U. American Indian & Alaska Native V. Some Other Race W. Native Hawaiian & Other Pacific Islander

MAKE CHECK PAYABLE TO:

MAIL APPLICATION & PAYMENT TO:

REGISTRATION FEE table with columns: USA Swimming Fee, LSC Fee, TOTAL DUE. Rows: Individual (\$46.00 + \$7.00 = \$53.00), Family (\$90.00 + \$7.50 = \$97.50), Life (\$1,000.00 + 5.00 = \$1,005.00)

USA Swimming occasionally makes its membership list available to its marketing partners. Please notify USA Swimming's Member Services Dept. at 719/866-4578 if you do not wish to receive these mailings.

- Check if you would like to learn more about USA Swimming's community initiatives
Check if you would like to receive the electronic USA Swimming Newsletter