



PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION TO ENSURE THAT CONTACT INFORMATION IS CORRECT AND UP TO DATE:

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:

PREFERRED NAME DATE OF BIRTH (MM/DD/YY) SEX (M-F) CLUB CODE CLUB NAME

(Bill, Beth, Scooter, Liz, Bobby) (Required) Mailing Address If not affiliated with a club, enter "Unattached"

CITY STATE ZIP CODE

AREA CODE TELEPHONE NO. AREA CODE TELEPHONE NO. EXTENSION AREA CODE TELEPHONE NO.

HOME WORK MOBILE

E-MAIL ADDRESS

IF ANY OF THE ABOVE INFORMATION CHANGES DURING THE YEAR - PLEASE NOTIFY YOUR LSC REGISTRATION/MEMBERSHIP PERSON OF THE CHANGES

RACE AND ETHNICITY (OPTIONAL): You may check up to two choices

- 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

CITIZENSHIP/FINA:

- U.S. Citizen: Yes No
Are you a member of another FINA federation: Yes No
If Yes, which federation:

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

MEMBERSHIP CODE: Check all that apply

- Junior Coach - ages 16 & 17 (no background check required)
Coach-Full Time (Employed full time as a coach)
Coach-Part Time (Primary employment is NOT coaching)
Certified Official (Starter, Stroke & Turn, Meet Referee, Administrative, etc.)
Other (Chaperone, Meet Director, Meet Manager, Athlete Trainers, Massage Therapist, etc.)

If coach, primary age group that you coach (may be more than one): 10-Un 11-12 13-14 15-18 19+ Masters

NON-ATHLETES

BGC at www.usaswimming.org/backgroundcheck APT at www.usaswimming.org/apt

COACHES: Also requires current CPR/AED & Safety Training for Swim Coaches certifications

EDUCATION REQUIREMENT FOR COACHES at: www.usaswimming.org/foc

- An individual registering as a coach for the first time must complete the online Foundations of Coaching 101 test prior to becoming a Coach Member.
Prior to registering as a coach for the second year, the online tests for Foundations of Coaching 201 and Rules and Regulations must be completed.
USADA Coach's Advantage Tutorial at www.usaswimming.org/learn

ACCEPTABLE SAFETY REQUIREMENT COURSES AND ONLINE TESTS ARE AVAILABLE AT STSC for Swim Coaches

COACHES AND OFFICIALS: Concussion Protocol Training - Courses from the Center for Disease Control and Prevention (CDC) or the National Federation of State High School Associations (NFHS), as well as individual states' required courses will satisfy the USA Swimming requirement.

- By becoming a member of USA Swimming, I hereby agree to abide by the rules, regulations and Code of Conduct of USA Swimming.
By becoming a member of Alaska Swimming, I acknowledge that I have read & will abide by the Code of Conduct of Alaska Swimming.
I acknowledge that when I learn of facts that give reason to suspect that a child has suffered an incident of abuse, including sexual abuse, I must report to law enforcement within 24 hours pursuant to The Protecting Young Victims from Sexual Abuse and Safe Sport Authorization Act.
I acknowledge that I have reviewed and agree to abide by rules and regulations of the Minor Athlete Abuse Prevention Policy and that I must complete Athlete Protection Training.

MAKE CHECK PAYABLE TO:

Your club will be billed for your registration fee. Please contact your club for payment instructions. Make check payable to Alaska Swimming only if registering as unattached.

2022 REGISTRATION FEE

September 1, 2021 through December 31, 2022

USA Swimming Fee + LSC Fee = Total Due

Table with 2 columns: Fee Type, Amount. Rows: Individual (\$66.00 + \$2.00 = \$68.00), Life (\$1,000.00 + \$0.00 = \$1000.00)

Signature Date
By signing this application, I verify that the above is true & correct.

MAIL APPLICATION & PAYMENT TO: AKSwimMembership@gmail.com or: Membership Chair, 17249 Yellowstone Dr., Eagle River, AK 99577

FOR LSC REGISTRAR USE ONLY:

BGC APT STSC STSC-ONLINE CPT
CPR FOC 101 FOC 201 Rules & Regs AKCOD

REGISTRATION DATE