



PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

Form fields for personal information: LAST NAME, LEGAL FIRST NAME, MIDDLE NAME, PREFERRED NAME, DATE OF BIRTH (MO/DAY/YR), SEX (M/F), AGE, CLUB CODE, NAME OF CLUB YOU REPRESENT. Includes instruction: (Bill, Beth, Scooter, Liz, Bobby) and If not affiliated with a club, enter "Unattached"

NOTE: If you are 18 years of age or older, you are required to abide by to the Minor Athlete Abuse Prevention Policy. In addition, in order to be a member in good standing you must complete the Athlete Protection Training. The training can be accessed at www.usaswimming.org/apt

Form fields for guardian and contact information: GUARDIAN #1 LAST NAME, GUARDIAN #1 FIRST NAME, GUARDIAN #2 LAST NAME, GUARDIAN #2 FIRST NAME, MAILING ADDRESS, CITY, STATE, ZIP CODE, AREA CODE, TELEPHONE NO., FAMILY/HOUSEHOLD EMAIL ADDRESS, MEMBER'S EMAIL ADDRESS

U.S. CITIZEN: [] YES [] NO
ARE YOU A MEMBER OF ANOTHER FINA FEDERATION? [] YES [] NO
IF YES, WHICH FEDERATION: _____

HAVE YOU REPRESENTED THAT FEDERATION AT INTERNATIONAL COMPETITION? [] YES [] NO

- [] 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 (must be 13 years of age or older)

OPTIONAL
DISABILITY: [] A. Legally Blind or Visually Impaired, [] B. Deaf or Hard of Hearing, [] C. Physical Disability such as amputation, cerebral palsy, dwarfism, spinal injury, mobility impairment, [] D. Cognitive Disability such as severe learning disorder, autism
RACE AND ETHNICITY (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

2021 REGISTRATION FEE
June 1, 2020 through December 31, 2021
USA Swimming Fee + LSC Fee = TOTAL DUE
\$64.00 + \$20.00 = \$84.00

PAYMENT INFO:

Your club will be billed for your registration fee. Please contact your club for payment instructions. If you are registering with a club, do NOT send payment. If you are registering as UNATTACHED, you will need to send payment with your application. Checks should be made out to Alaska Swimming.

SEND APPLICATION TO:

AKSwimMembership@gmail.com or Angela Heaphy 17249 Yellowstone Dr Eagle River, AK 99577

HIGH SCHOOL STUDENTS - Year of high school graduation: _____
YEAR LAST REGISTERED: _____. IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2020, ENTER THAT CLUB CODE: _____, LSC CODE: _____ AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB: _____.

[] By becoming a member of Alaska Swimming, I acknowledge that both parent/guardian and athlete have read & will uphold and abide by the Code of Conduct of Alaska Swimming.

SIGN HERE x _____ SIGNATURE OF ATHLETE, PARENT OR GUARDIAN _____ DATE _____