**OFFICE USE**  Clear  Unattached until: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year Registered: \_\_\_\_\_\_\_\_\_\_\_\_

University -> Club  Club -> University  Former Year Transfer in Current Year

**MINNESOTA SWIMMING ATHLETE TRANSFER APPLICATION**

**$5 Application Processing Fee**

PARENT, GUARDIAN OR ADULT ATHLETE MUST READ, COMPLETE & SIGN THIS APPLICATION

**Please note**: If the Minnesota Swimming office does not receive a completed/signed transfer form & fee, the transfer will not be processed

and no new club affiliation will be reflected for the athlete.

\*\*\* *Transfers will NOT be accepted at Swim Meets. Transfer forms may only be sent to the office*. \*\*\*

(You may declare yourself as “unattached” to the meet referee at a swim meet prior to competing.)

Athlete’s Legal Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Last Name First Name Middle Initial Preferred Name

Athlete’s Current Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

NEW? Yes No Address & Street City State Zip Code

Phone Number  Home or Cell: (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Athlete’s Birth Date: \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

NEW? Yes No Area Code Month Day Year

Gender: M F Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Athlete or  Family/Parent

OLD INFORMATION Former Club You Represented: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Club Code: \_\_\_\_\_\_\_ LSC: \_\_\_\_\_

NEW INFORMATION New Minnesota Swimming Club: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ New Club Code: \_\_\_\_\_\_\_\_

(REQUIRED) Last USA Swimming competition representing previous club in an attached status

The date listed is the last day of the meet swum with former team. **Do NOT leave blank**. If athlete never competed with former team, write “no meets”.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Meet: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(REQUIRED) Signature of Parent/Guardian or Adult Athlete: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Checking this box and typing in your name constitutes an electronic signature.

**Statement of Transfer:**

This signature will confirm that the above information is correct. I understand that the above athlete will remain Unattached for 120 consecutive days from

the date of last open sanctioned competition in accordance with USA Swimming Rules and Regulation 203.3, and until the requested transfer has been

received & approved in the Minnesota Swimming office. Unattached athletes may not participate on any club relays or score team points.

Transfer is effective upon receipt of the completed transfer form and fee by the Minnesota Swimming Office.

Athlete will be unattached until the 120 days is determined and/or transfer is resolved. Based on the attachment date, the athlete will be listed on the

SWIMS database reflecting their new club as either unattached or attached.

The athlete’s former club will be notified that a transfer has occurred. The former club has the responsibility to notify the LSC registrar within 60 days if the club has obtained a court judgment pursuant to USA Swimming Rules Regulations Article 203.6 which would cause the swimmer to be unattached until such time as the judgement has been satisfied.

*Collegiate Athletes registered with their USA-S School Team,* *returning to summer teams or*

*back to their USA-S School Teams will be exempt from the 120 day rule. [UAS Swimming “School Rule”]*

**Send completed/signed form to**: Minnesota Swimming, 1001 Highway #7, Hopkins, MN 55305

Email: [cshapley@mnswim.org](mailto:cshapley@mnswim.org) Fax: 952-988-4183 **Payment required before processing**.

**OFFICE USE ONLY**: Date Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

$5 Fee Paid Check #/Cash \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OR**

$5 Fee Deducted by ACH/ePay **Club**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Month/Year posted to Club Account: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*NOTE: All transfers to be posted to club ACH/ePay accounts MUST be accompanied by a Transmittal of Funds form from a club registrar or official*.

Attachment Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Transfer Complete (date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_