



PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

Form fields for LAST NAME, LEGAL FIRST NAME, MIDDLE NAME, PREFERRED NAME, DATE OF BIRTH, SEX, AGE, CLUB CODE, NAME OF CLUB YOU REPRESENT

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 #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

Table with 2 columns: Fee Name, Amount. Includes 2020-2021 Outreach Fee, USA Swimming Fee (\$5.00), LSC Swimming Fee (\$2.00), and Total Due (\$7.00).

OPTIONAL DISABILITY and RACE AND ETHNICITY sections with checkboxes for various categories.

MAKE CHECK PAYABLE TO:

OZARK SWIMMING

MAIL APPLICATION & PAYMENT TO:

OZARK SWIMMING
17 JUNCTION DR. #235
GLEN CARBON, IL 62034 OR
ozarklsc.treasurer@hotmail.com

- 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)

Form fields for HIGH SCHOOL STUDENTS - Year of high school graduation, YEAR LAST REGISTERED, CLUB CODE, LSC CODE, AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB, SIGN HERE, SIGNATURE OF ATHLETE, PARENT OR GUARDIAN, DATE

LSC USE ONLY
REG. DATE :
CHECK #:

APPROPRIATE PAPER WORK SHOWING LSC QUALIFICATIONS FOR THIS OUTREACH REGISTRATION MUST BE ATTACHED TO THIS FORM IN ORDER TO PROPERLY REGISTER THIS ATHLETE.

To qualify for the Outreach Athlete Registration, the athlete's family must meet the eligibility requirements of at least one of the following:

- Federal Free & Reduced Lunch Program Verification Form
Medicaid Card
Food Stamp Letter
Current signed Federal Tax Return
Other documentation consistent with the Income Eligibility Guidelines for the National School Lunch Program

All verification must have dates on it to show that it is valid during the 2021 Season