



PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

Form fields for personal information: LAST NAME, LEGAL FIRST NAME, MIDDLE NAME, PREFERRED NAME, DATE OF BIRTH (MM/DD/YY), SEX (M/F), AGE, CLUB CODE, NAME OF CLUB YOU REPRESENT. Includes a note: (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 information: GUARDIAN #1 LAST NAME, GUARDIAN #1 FIRST NAME, GUARDIAN #2 LAST NAME, GUARDIAN #2 FIRST NAME

Mailing address field: MAILING ADDRESS

Form fields for location: CITY, STATE, ZIP CODE

Form fields for contact: AREA CODE, TELEPHONE NO., FAMILY/HOUSEHOLD EMAIL ADDRESS

Form field for MEMBERS'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

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

MAKE CHECK PAYABLE

MAIL APPLICATION & PAYMENT

- [ ] 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)

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: \_\_\_\_\_

SIGN HERE x

SIGNATURE OF ATHLETE, PARENT OR GUARDIAN

DATE