



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 a note: '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

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
\$5.00 + \$2.00 = \$7.00

MAKE CHECK PAYABLE TO: GEORGIA SWIMMING

MAIL APPLICATION & PAYMENT TO: LORA THOMPSON 1712 Georgia Club Dr, Statham, GA 30666 registrar@gaswim.org

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

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: \_\_\_\_\_

- [ ] 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)

SIGN HERE x \_\_\_\_\_ SIGNATURE OF ATHLETE, PARENT OR GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_

REG. DATE/LSC USE ONLY \_\_\_\_\_