USA SWIMMING – 2018 CLUB APPLICATION

Club fee = $300 per year (make checks payable to Utah Swimming)
Utah Swimming, PO Box 71837, SLC, Utah 84171

CLUB CODE: _____ CLUB NAME: _____

NAME OF OWNER/BUSINESS/LEGAL ENTITY IF DIFFERENT FROM CLUB NAME:

1. _____ 4. _____

2. _____ 5. _____

3. _____

CLUB SETTING: ☐ Rural ☐ Suburban ☐ Urban

PLEASE CHECK ONE:

☐ NEW CLUB ☐ RENEWING CLUB
(Club is defined as a group with athletes and coaches. Insurance certificate will be issued.)

FIRST YEAR AS A USA SWIMMING CLUB: _____

NEAREST MAJOR CITY: _____ CLUB WEB SITE: _____

PRE-EMPLOYMENT SCREENING

☐ By checking this box and signing below, I formally acknowledge that this club is conducting a pre-employment screening on all new employees who are required to be members of USA Swimming as required in the USA Swimming Rules & Regulations, Article 502.6.8.

Signature: _____ Printed Name: _____ Date: _____

Failure to check this box and sign this statement will result in the club application being rejected.

RACING START CERTIFICATION

☐ By checking this box and signing below, I formally acknowledge that this club complies with all Racing Start Certification requirements as stated in the USA Swimming Rules & Regulations, Article 103.2.2 and maintains records for its athlete members.

Head Coach Signature: _____ Printed Name: _____ Date: _____

Failure to check this box and sign this statement will result in the club application being rejected.

CLUB/MARKETING CONTACT/REPRESENTATIVE (This person will receive USA Swimming mailings and be responsible for distributing the information.)

CLUB/MARKETING CONTACT/REPRESENTATIVE: _____

POSITION (board president, owner, coach, etc.): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ BUSINESS: _____ MOBILE: _____

FAX: _____ EMAIL: _____

PRIMARY ORGANIZATIONAL AFFILIATION, WHO OWNS THE CLUB, CLUB TAX LISTING (To register as a club, a selection must be made for Primary Organizational Affiliation, Who Owns the Club and Club Tax Listing.)

☐ *Check if registered last year and there are no changes to the Primary Organizational Affiliation, Who Owns the Club and Club Tax Listing that were listed last year.*

PRIMARY ORGANIZATIONAL AFFILIATION
(Please note the club's primary relationship/affiliation with any one of the following organizations. **Choose one only.)**

- ☐ Not Applicable
- ☐ Boys & Girls Club
- ☐ College/University
- ☐ Country Club
- ☐ Health & Fitness Club
- ☐ Hospital
- ☐ Jewish Community Center
- ☐ Park & Recreation Department
- ☐ Private School
- ☐ Public School/District
- ☐ Summer Club or Home Owner's Association
- ☐ YMCA
- ☐ YWCA
- ☐ Other

WHO OWNS THE CLUB

- ☐ Coach Owned (**MUST PROVIDE OWNER INFO)
- ☐ Boys & Girls Club
- ☐ College/University
- ☐ Country Club
- ☐ Health & Fitness Club
- ☐ Hospital
- ☐ Jewish Community Center
- ☐ Non-Profit Corporation (Parent Board)
- ☐ Park & Recreation Department
- ☐ Private School
- ☐ Public School/District
- ☐ Summer Club or Home Owner's Association
- ☐ YMCA
- ☐ YWCA
- ☐ Other

**NAME OF COACH OWNER: _____

COACH'S USA SWIMMING ID#: _____

CLUB TAX LISTING
(Please list the club's main tax listing and not the parent's/booster organization if it is a separate entity.)

- ☐ Sole Proprietor
- ☐ Partnership
- ☐ LLC
- ☐ Sub-S Corporation
- ☐ Other For-Profit Corporation
- ☐ 501(c)3 Non-Profit Corporation
- ☐ Other 501(c) Non-Profit
- ☐ Other Non-Profit Corporation
- ☐ Does Not Apply

LEARN TO SWIM PROGRAM

Does the club or coach own and operate a Learn to Swim Program? ☐ Yes ☐ No
If yes, is the club a current Make a Splash Local Partner? ☐ Yes ☐ No
If no, is the club associated with a Learn to Swim Program? ☐ Yes ☐ No

FIND-A-CLUB CONTACT (To register as a club, a Find-a-Club Contact must be listed. Information will appear on the Find-A-Club page of USA Swimming's Web site.)

FIND-A-CLUB CONTACT: _____

PHONE: _____ EMAIL: _____

REGISTRATION DATE AND TYPE

REGISTRATION DATE: _____ (For LSC Office Use Only)

PLEASE CHECK ONE:

☐ YEAR-ROUND CLUB ☐ SEASON 1 CLUB ☐ SEASON 2 CLUB

HEAD COACH

COACH: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ BUSINESS: _____ MOBILE: _____

FAX: _____ EMAIL: _____

CLUB PRESIDENT

CLUB PRESIDENT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ BUSINESS: _____ MOBILE: _____

FAX: _____ EMAIL: _____

FACILITIES USED BY YOUR CLUB – LIST ALL FACILITIES (To register as a club, a facility must be listed. If additional space is needed to list facilities, use a separate sheet of paper and attach to the application.)

☐ *Check if registered last year and there are no changes to the facilities that were listed last year.*

If a facility is no longer in use by the club, list the facility name and the word "Delete" (example: Nathan Natatorium – Delete).

FACILITY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

POOLS AT THIS FACILITY:

Pool 1: Length:_____ ☐ Yards ☐ Meters Width:_____ ☐ Yards ☐ Meters ☐ Indoor ☐ Outdoor
# of Lanes:_____ # of Lanes:_____ ☐ L-shaped pool

Pool 2: Length:_____ ☐ Yards ☐ Meters Width:_____ ☐ Yards ☐ Meters ☐ Indoor ☐ Outdoor
# of Lanes:_____ # of Lanes:_____ ☐ L-shaped pool

FACILITY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

POOLS AT THIS FACILITY:

Pool 1: Length:_____ ☐ Yards ☐ Meters Width:_____ ☐ Yards ☐ Meters ☐ Indoor ☐ Outdoor
# of Lanes:_____ # of Lanes:_____ ☐ L-shaped pool

Pool 2: Length:_____ ☐ Yards ☐ Meters Width:_____ ☐ Yards ☐ Meters ☐ Indoor ☐ Outdoor
# of Lanes:_____ # of Lanes:_____ ☐ L-shaped pool

FACILITY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

POOLS AT THIS FACILITY:

Pool 1: Length:_____ ☐ Yards ☐ Meters Width:_____ ☐ Yards ☐ Meters ☐ Indoor ☐ Outdoor
# of Lanes:_____ # of Lanes:_____ ☐ L-shaped pool

Pool 2: Length:_____ ☐ Yards ☐ Meters Width:_____ ☐ Yards ☐ Meters ☐ Indoor ☐ Outdoor
# of Lanes:_____ # of Lanes:_____ ☐ L-shaped pool

FACILITY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

POOLS AT THIS FACILITY:

Pool 1: Length:_____ ☐ Yards ☐ Meters Width:_____ ☐ Yards ☐ Meters ☐ Indoor ☐ Outdoor
# of Lanes:_____ # of Lanes:_____ ☐ L-shaped pool

Pool 2: Length:_____ ☐ Yards ☐ Meters Width:_____ ☐ Yards ☐ Meters ☐ Indoor ☐ Outdoor
# of Lanes:_____ # of Lanes:_____ ☐ L-shaped pool

If any of the above information changes, please notify your LSC Registration Chair.