



USA SWIMMING (LSC) REG DATE: \_\_\_\_\_

**2021 PREMIUM ATHLETE REGISTRATION APPLICATION**

LSC: Minnesota Swimming, Inc.

PLEASE PRINT LEGIBLY ● COMPLETE ALL 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	
(Bill, Beth, Scooter, Liz, Bobby)						If not affiliated with a club, enter "Unattached"	

**NOTE:** If you are 18 years of age or older, you are required to abide by the Minor Athlete Abuse Prevention Policy (MAAPP). In addition, in order to be a member in good standing, you must complete the Athlete Protection Training (APT). The training can be accessed at [www.usaswimming.org/apt](http://www.usaswimming.org/apt)

GUARDIAN LAST NAME	GUARDIAN FIRST NAME	GUARDIAN LAST NAME	GUARDIAN FIRST NAME
MAILING ADDRESS			
CITY			
STATE		ZIP CODE	
AREA CODE	TELEPHONE NUMBER	FAMILY/HOUSEHOLD E-MAIL ADDRESS	MEMBER'S EMAIL

**U.S. CITIZEN:**  YES  NO Are you a member of another FINA Federation?  YES  NO If so, which Federation? \_\_\_\_\_  
 Have you represented that Federation at International Competition:  YES  NO

<b>DISABILITY:</b>	<b>OPTIONAL RACE AND ETHNICITY</b> (You may check up to two choices):
<input type="checkbox"/> A. Legally Blind or Visually Impaired	<input type="checkbox"/> O. Black or African American
<input type="checkbox"/> B. Deaf or Hard of Hearing	<input type="checkbox"/> R. Asian
<input type="checkbox"/> C. Physical Disability such as amputation, cerebral palsy, dwarfism, spinal injury, mobility impairment	<input type="checkbox"/> S. White
<input type="checkbox"/> D. Cognitive Disability such as severe learning disorder, autism	<input type="checkbox"/> T. Hispanic or Latino
	<input type="checkbox"/> U. American Indian & Alaska Native
	<input type="checkbox"/> V. Some Other Race
	<input type="checkbox"/> W. Native Hawaiian & Other Pacific Islander

**MAKE CHECK PAYABLE TO:**  
 Your swim team or, if UN, to MNSI)

**MAIL APPLICATION & PAYMENT TO:**  
 Your swim team or, if Unattached, to:

**Minnesota Swimming, Inc.**  
 1001 Highway #7  
 Hopkins, MN 55305  
 Inquiries: Email: [tmece@mns swim.org](mailto:tmece@mns swim.org)

<b>2021 REGISTRATION FEE</b>	
June 1, 2020 through Dec. 31, 2021	
USA Swimming Fee	\$64.00
LSC Fee	8.00
<b>TOTAL DUE</b>	<b>\$72.00</b>
<input type="checkbox"/> <u>Dual Member</u> (Already Non-athlete Member) Pay LSC fee only: \$8.00	

HIGH SCHOOL STUDENTS - Year of high school graduation: \_\_\_\_\_

**IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2020,** enter club and last date of completion.  
 You must also complete a [TRANSFER FORM](#). Return transfer form with \$5 fee to MNSI office or your swim club.  
**YEAR LAST REGISTERED:** \_\_\_\_\_ CLUB: \_\_\_\_\_ Date of last meet competing with 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)