USA SWIMMING

2018 ATHLETE REGISTRATION APPLICATION
LSC: MISSISSIPPI SWIMMING

PLEASE PRINT LEGIBLY ● COMPLETE ALL INFORMATION:

LAST NAME | LEGAL FIRST NAME | MIDDLE NAME

PREFERRED NAME (Bill, Beth, Scooter, Liz, Bobby) | DATE OF BIRTH (MO/DAY/YR) | SEX (M/F) | AGE | CLUB CODE | NAME OF CLUB YOU REPRESENT

If not affiliated with a club, enter "Unattached"

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 E-MAIL 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 TO:

MISSISSIPPI SWIMMING

MAIL APPLICATION & PAYMENT TO:

MISSISSIPPI SWIMMING
CANDACE LOPER
1038 NORTHPOINTE DRIVE
JACKSON, MS 39211

2018 REGISTRATION FEE
Sept. 1, 2017 through Dec. 31, 2018

USA Swimming Fee	$58.00
LSC Fee	6.00
TOTAL DUE	**$64.00**

HIGH SCHOOL STUDENTS – Year of high school graduation: _____

YEAR LAST REGISTERED: _____. IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2017, 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 _____