### USA SWIMMING



### 2018 APPRENTICE OFFICIAL APPLICATION INITIAL TRAINING

**LSC: MIDWESTERN SWIMMING SESSION DATE:**

**PLEASE PRINT LEGIBLY ⚫ COMPLETE ALL INFORMATION TO ENSURE THAT CONTACT INFORMATION IS CORRECT AND UP TO DATE:**

# LAST NAME LEGAL FIRST NAME MIDDLE NAME

## Have you ever been a member of USA Swimming under a different last name? If yes, please provide that name:

## Previously registered with USA Swimming? 🞏 Yes 🞏 No If registered in a different LSC, which LSC:

## PREFERRED NAME DATE OF BIRTH (MO/DAY/YR) SEX (M/F) CLUB CODE CLUB NAME

**(Bill, Beth, Scooter, Liz, Bobby) If not affiliated with a club, enter “Unattached”**

## MAILING ADDRESS

## CITY STATE ZIP CODE

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## AREA CODE TELEPHONE NO. AREA CODE TELEPHONE NO. E-MAIL ADDRESS

**HOME** **MOBILE**

**THIS APPRENTICE OFFICIAL STATUS EXPIRES 60 DAYS FROM THE DATE OF THE INITIAL TRAINING SESSION. CONTACT YOUR *LSC OFFICIALS CHAIR* FOR FURTHER INSTRUCTIONS.**

**MWS OFFIICIALS CHAIR:**

**MAIL OR EMAIL APPLICATION TO:**

**Scot Sorensen Betsy Purcell**

**Registration/Membership Coordinator** [**betsypurcell@cox.net**](mailto:betsypurcell@cox.net)

**110 N 248th Cir**

**Waterloo NE 68069-4690**

[**scotsorensen@cox.net**](mailto:scotsorensen@cox.net)