###  USA SWIMMING 2019 ATHLETE REGISTRATION APPLICATION



 **LSC: South Carolina Swimming**

**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”**

#  GUARDIAN #1 LAST NAME GUARDIAN #1 FIRST NAME GUARDIAN #2 LAST NAME GUARDIAN #2 FIRST NAME

##  MAILING ADDRESS

 **U.S. CITIZEN:** [ ]  **YES** [ ]  **NO**

##  CITY STATE ZIP CODE

**ARE YOU A MEMBER OF ANOTHER FINA FEDERATION?** [ ]  **YES** [ ]  **NO**

**IF YES, WHICH FEDERATION:**

**HAVE YOU REPRESENTED THAT**

**FEDERATION AT INTERNATIONAL**

**COMPETITION?** [ ]  **YES** [ ]  **NO**

##  AREA CODE TELEPHONE NO. FAMILY/HOUSEHOLD E-MAIL ADDRESS

**SC Swimming, Inc**

**SC Swimming
PO Box 460
Six Mile, SC 29682-0460**office@sc-swimming.org

**MAKE CHECK PAYABLE TO:**

**MAIL APPLICATION & PAYMENT TO:**

|  |
| --- |
| **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 |

[ ]  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)*

**HIGH SCHOOL STUDENTS – Year of high school graduation:**

**YEAR LAST REGISTERED:** **. IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2018, ENTER THAT**

**CLUB CODE:**  **LSC CODE:** **AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB:** **.**

**SIGN**

**HERE** x

 **SIGNATURE OF ATHLETE, PARENT OR GUARDIAN DATE**

#### 2019 REGISTRATION CATEGORIES (please select only 1)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Membership Type** | **Valid** | **USA Swimming Fee** | **SC Swimming** **LSC Fee** | **Total Fee** | **Restrictions** |
|[ ]  Premium | 9/1/2018 – 12/31/2019 | $60.00 | $30.00 | $90.00 | None |
|[ ]  Flex(12 & Under) | 9/1/2018 – 12/31/2019 | $10.00 | $10.00 | $20.00 | No more than 2 sanctioned meets per registration year.Only for meets below LSC Championships, Zone, Sectional, and National Levels. |
|[ ]  Season 1 | 4/4/2019 – 8/31/2019 | $30.00 | $8.50 | $38.50 | Only for meets below Zone, Sectional, and National Levels. |
|[ ]  Outreach | 9/1/2018 – 12/31/2019 | $5.00 | $2.00 | $7.00 | Must meet eligibility criteria on page 2. |
|[ ]  Single Meet | 9/1/2018 – 12/31/2019 | $10.00 | $5.00 | $15.00 | For **unattached** **open water** competition. Only for meets below Zone, Sectional, and National Levels. |

**SOUTH CAROLINA SWIMMING OUTREACH PROGRAM**

Family qualifying income for the 2019 Outreach program is 138% of the Federal Poverty Guideline.

**INCOME MUST FALL AT OR BELOW THIS LEVEL IN ORDER TO QUALIFY FOR OUTREACH**

2018 Federal Poverty Level Guidelines Table

| **Household/Family Size** | **138%** |
| --- | --- |
| 1 | 16,753 |
| 2 | 22,715 |
| 3 | 28,676 |
| 4 | 34,638 |
| 5 | 40,600 |
| 6 | 46,561 |
| 7 | 52,523 |
| 8 | 58,484 |

Add $4,320 for each person over 8

**Applying for Outreach**

**New or First Time**: Required items: Birth Certificate + Copy of Family 2017 Federal 1040 Income Tax Return (first two pages with dependents listed).

**Returning:** Copy of Family 2017 Federal 1040 Income Tax Return (first two pages with dependents listed).

Updated 8/1/2018