### 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