###  USA SWIMMING 2014 OUTREACH ATHLETE REGISTRATION APPLICATION



 **LSC: SE**

**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”**

#  FATHER/GUARDIAN LAST NAME FATHER/GUARDIAN FIRST NAME MOTHER/GUARDIAN LAST NAME MOTHER/GUARDIAN FIRST NAME

##  MAILING ADDRESS

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

##  CITY STATE ZIP CODE

 –

 **ARE YOU A MEMBER OF ANOTHER FINA**

 **FEDERATION?** [ ]  **YES** [ ]  **NO**

##  AREA CODE TELEPHONE NO. FAMILY/HOUSEHOLD E-MAIL ADDRESS IF YES, WHICH FEDERATION:

 **HAVE YOU REPRESENTED THAT**

**MAKE CHECK PAYABLE TO:**

**DISABILITY:RACE AND ETHNICITY***(You may***FEDERATION AT INTERNATIONAL**

*[ ]  A. Legally Blind or Visually Impaired check up to two choices):* **COMPETITION?** [ ]  **YES** [ ]  **NO**

**Local Swim Club or if Unattached SE Swimming**

## *[ ]  B. Deaf or Hard of Hearing [ ]  Q. Black or African American*

#### 2014 OUTREACH FEE

**Sept. 1, 2013 through Dec. 31, 2014**

USA Swimming Fee $5.00

##### LSC Fee

# TOTAL DUE $5.00

[ ]  C. Physical Disability *such as* *[ ]*  R. Asian

**MAIL APPLICATION & PAYMENT TO:**

 *amputation, cerebral palsy, [ ]*  S. White

**Local Swim Club or if Unattached to:**

**SE Swimming, Inc**

**327 E. Longleaf Dr**

**Auburn, AL 36832**

 *dwarfism, spinal injury,* *[ ]*  T. Hispanic or Latino

 *mobility impairment* [ ]  U. American Indian & Alaska Native

[ ]  D. Cognitive Disability *such as* [ ]  V. Some Other Race

*severe learning disorder,* [ ]  W. Native Hawaiian & Other Pacific

 *autism*  Islander

**APPROPRIATE PAPER WORK SHOWING ENROLLMENT IN ANY REDUCED OR FREE LUNCH PROGRAM IS NEEDED FOR THIS OUTREACH REGISTRATION, PLEASE**

**ATTACHED DOCUMENTATION TO THIS FORM IN ORDER FOR PROPER REGISTERED.**

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

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)*

**YEAR LAST REGISTERED:** **. IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2013, 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 REG. DATE/LSC USE ONLY**