### USA SWIMMING – 2022 ORGANIZATION APPLICATION



**Organizational membership is only available for those entities that are actively involved in hosting USA Swimming activities.**

ORGANIZATION CODE: \_\_\_\_\_\_\_\_\_\_\_ ORGANIZATION NAME:

ARE YOU AFFILIATED WITH A USA SWIMMING CLUB? **🞏** Yes **🞏** No

IF YES, CLUB CODE: \_\_\_\_\_\_\_\_\_\_\_ CLUB NAME:

**PLEASE CHECK ONE:**

**🞏** NEW ORGANIZATION **🞏** RENEWING ORGANIZATION

(Organization is defined as a group without athletes and coaches. Insurance is only provided for activities which have been approved by USA Swimming**.** Please contact [membership@usaswimming.org](mailto:membership@usaswimming.org). After approval, Risk Management Services can issue a certificate of insurance. Please contact Sandi Blumit (ext. 12) or Lori Sabato (ext. 19) at 1-800-777-4930 at Risk Management Services for assistance. **Seasonal clubs cannot be organizations.**)

FIRST YEAR AS A USA SWIMMING ORGANIZATION:

NEAREST MAJOR CITY: ORGANIZATION WEB SITE:

**PRIMARY CONTACT PERSON:**

CONTACT:

POSITION (President, Director, etc.):

ADDRESS:

CITY: STATE: ZIP:

HOME PHONE: BUSINESS: MOBILE:

FAX: EMAIL:

**PRIMARY PURPOSE OF YOUR ORGANIZATION:**

* BOOSTER CLUB
* SWIM LEAGUE
* OTHER

DO YOU PLAN TO RUN FUNDRAISERS? **🞏** YES **🞏** NO

DO YOU PLAN TO RUN SWIM MEETS? **🞏** YES **🞏** NO

**REGISTRATION DATE**

REGISTRATION DATE: (For LSC Office Use Only)

SES Office Address:

**SES Office**

**8607 Marlin Pl Panama City Beach, FL 32408**

*If any of the above information changes, please notify your LSC Registration Chair.*