



USA SWIMMING

2019 ATHLETE REGISTRATION APPLICATION

LSC: UTAH

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

LAST NAME	LEGAL FIRST NAME	MIDDLE NAME
<input type="text"/>	<input type="text"/>	<input type="text"/>

PREFERRED NAME	DATE OF BIRTH (MO/DAY/YR)	SEX (M/F)	AGE	CLUB CODE	NAME OF CLUB YOU REPRESENT
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

(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
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

MAILING ADDRESS

CITY	STATE	ZIP CODE
<input type="text"/>	<input type="text"/>	<input type="text"/>

AREA CODE	TELEPHONE NO.	FAMILY/HOUSEHOLD E-MAIL ADDRESS
<input type="text"/>	<input type="text"/>	<input type="text"/>

U.S. CITIZEN: YES NO

ARE YOU A MEMBER OF ANOTHER FINA FEDERATION? YES NO

IF YES, WHICH FEDERATION: _____

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)

- G. Black or African American
- H. Asian
- I. White
- J. Hispanic or Latino
- K. American Indian & Alaska Native
- L. Some Other Race
- M. Native Hawaiian & Other Pacific Islander

MAKE CHECK PAYABLE TO:

Murray City
Murray Aquatic Club
 c/o **Adam Huff**
 202 Murray Park Ave
 Murray, Utah 84107

MAIL APPLICATION & PAYMENT TO:

HAVE YOU REPRESENTED THAT FEDERATION AT INTERNATIONAL COMPETITION? YES NO

2019 REGISTRATION FEE
Sept 1, 2018 through December 31, 2019

USA Swimming Fee	\$58.00
LSC Fee	\$22.00
Team Fee	\$25.00
TOTAL DUE	\$105.00

HIGH SCHOOL STUDENTS - Year of high school graduation: _____

YEAR LAST REGISTERED: ____ IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2014, 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

- 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)

REG. DATE/LSC USE ONLY _____