



CENTRAL ZONE DIVERSITY SELECT CAMP

June 7 – 10, 2012

OCCC – Oklahoma City, OK

Athlete Application

Hosted by Oklahoma Swimming Diversity Committee in conjunction with Oklahoma Swimming

APPLICATION DEADLINE: 3/8/12

RETURN APPLICATION TO: Angela Monty – Wisconsin Diversity Chair

218 E. Lawrence Street

Appleton, WI 54911

Athlete's Name: _____

Street Address: _____

City/State/Zip: _____

Phone: () _____

Athlete's Email Address: _____

USA Swimming Number: _____

Date of Birth: ___/___/___

Male Female

Club Name: _____

Parent Names: (Father) _____

(Mother) _____

Parent contact Email Address:

Central Zone Diversity Select Camp Eligibility:

The Central Zone Diversity Select Camp is open to any swimmer who represents an under-represented population that is less than 20% of the current USA Swimming membership. Please use other for economically disadvantaged which include those on or who would qualify for free lunch program. Please check all that apply:

African American Native American Hispanic Asian or Pacific Islander

Other _____

Signatures below testify to the eligibility of the athlete:

Parent/Guardian Signature: _____

Coach of record Signature: _____

MUST READ AND CHECK ALL OR APPLICATION WILL NOT BE CONSIDERED

- ___ I will be physically ready for training
- ___ I understand that I must meet the diversity eligibility (above) to apply for this camp.
- ___ I understand that I must meet the selection eligibility requirements and the qualifying time standards to apply for this camp.
- ___ I understand the additional camp details will be provided to me upon my acceptance.
- ___ I understand that additional paperwork that I receive MUST be returned to the Central Zone Diversity Select Camp Oversight Committee on or before their published deadlines.
- ___ I have listed at least three events on my application that I have achieved the time standard for this camp.
- ___ I understand funding for this camp will come from my local LSC for transportation, room and meals provided for me at the camp.
- ___ I am returning this application to my local LSC Board appointee for submission by their published deadline.

1. In order to apply, you should have qualified for your LSC Championship meet.

List up to three events you qualified for in your LSC championships	List your best time in each event	List the date when you achieved this time	List the meet where you achieved this time

2. If you did not qualify for your LSC Championships but still wish to apply for the camp, list your best events and best times.

List your best three events	List your best time in each event	List the date when you achieved this time	List the meet where you achieved this time

List your IMX Score for the current season: _____

(Find the IMX Score on your own *MY USA Swimming* page at www.usaswimming.org.

Find more information about IMX in the *Times/Time Standards* section on the USA Swimming website.)

(ATHLETE'S SIGNATURE) (DATE)

(COACH'S SIGNATURE) (DATE)