

2012 SEASONAL ATHLETE REGISTRATION APPLICATION

CHECK APPROPRIATE SEASONAL PERIOD: ☐ SEASON 1 ☐ SEASON 2 ☐ INDIVIDUAL SEASON ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	MEMBERSHIP IS ONLY FOR MEETS BELOW
	, SECTIONAL AND NATIONAL LEVELS.
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
IF UNATTACHED ENTER UN FATHER/GUARDIAN LAST NAME FATHER/GUARDIAN FIRST NAME MOTHER/GUARDIAN LAST	AST 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:
DISABILITY: RACE AND ETHNICITY (You may MAKE CHECK PAYABLE TO:	HAVE YOU REPRESENTED THAT FEDERATION AT INTERNATIONAL
□ A. Legally Blind or Visually Impaired make up to two choices if appropriate): □ B. Deaf or Hard of Hearing □ Q. Black or African American Wisconsin Swimming	COMPETITION? ☐ YES ☐ NO
☐ C. Physical Disability such as ☐ R. Asian MAIL APPLICATION & PAYMENT TO:	
amputation, cerebral palsy, dwarfism, spinal injury, T. Hispanic or Latino	REGISTRATION FEE
mobility impairment U. American Indian & Alaska Native Carol Granam	USA Swimming Fee \$28.00
severe learning disorder, W. Native Hawaiian & Other Pacific Mequon, WI 53092	LSC Fee \$11.00 TOTAL DUE \$39.00
autism Islander	101/12 BOL \$00.00
YEAR LAST REGISTERED: IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2011, ENTER THAT	USA Swimming occasionally makes its membership list available to its
CLUB CODE: LSC CODE:AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB:	marketing partners. Please notify USA Swimming's Member Services Dept at 719/866-4578 if you do not wish to receive these mailings.
HIGH SCHOOL STUDENTS – Year of high school graduation: SIGN	Check if you would like to learn more about the USA Swimming Foundation's initiatives
HERE X SIGNATURE OF ATHLETE, PARENT OR GUARDIAN	Check if you would like to receive the electronic USA Swimming

LSC: WI

REG. DATE / OFFICE USE ONLY