

2019 ATHLETE REGISTRATION APPLICATION

LSC: Virginia Swimming

PLEASE PRINT LEGIBLY COMPLETE ALL INFORMATION: LAST NAME			LEGAL FIRST NAME		MIDDLE NAME		
PREFERRED NAME DATE OF BIRTH (MMDDYY)		MDDYY) SEX (M/F) AG	SEX (M/F) AGE CLUB CODE		NAME OF CLUB YOU REPRESENT		
(Bill, Beth, Scooter, Liz, Bobby) PARENT/GUARDIAN #1 LAST NA	AME PARENT/GUARDIAN	I #1 FIRST NAME	If not affiliated PARENT/GUARDIAN #2 I	with a club, enter " LAST NAME PA	Unattached" ARENT/GUARDIAN #2 FIRS	ST NAME	
	MAILING ADDRI	ESS					
				us cr	TIZEN: YES NO	1	
CITY	STATE	ZIP CODE					
			_		OU A MEMBER OF ANOTH		
AREA CODE 1	FAMILY/HOUS	AMILY/HOUSEHOLD E-MAIL ADDRESS IF YES, WHICH FEDERATION:			,		
OPTIONAL			MAKE CHECK PAYABLE TO:		HAVE YOU REPRESENTED THAT		
DISABILITY: A. Legally Blind or Visually Impaired	nav	Virginia Swimming, Inc.		FEDERATION AT INTERNATIONAL COMPETITION? ☐ YES ☐ NO			
☐ B. Deaf or Hard of Hearing	check up to two choices): Q. Black or African American		PPLICATION & PAYMENT TO:				
☐ C. Physical Disability such as ☐ R. Asian amputation, cerebral palsy, ☐ S. White		<u> </u>	Virginia Swimming, Inc. PO Box 1059 Appomattox, VA 24522		2019 REGISTRATION FEE		
dwarfism, spinal injury, T. Hispanic or Latino mobility impairment U. American Indian & Alaska Native		PO Bo			Sept. 1, 2018 through Do	ec. 31, 2019 \$60.00	
☐ D. Cognitive Disability such as ☐ V. Some Other Race		Appor			LSC Fee	\$17.00	
severe learning disorder, autism		Fax: (434)352-0203 registrationchair@virginiaswimming		TOTAL DUE	\$77.00		
HIGH SCHOOL STUDENTS - Year of high so	chool graduation:				you would like to loarn more about	t the LICA	
YEAR LAST REGISTERED: IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2015, ENTER THAT				Check if you would like to learn more about the USA Swimming Foundation's initiatives			
CLUB CODE: LSC CODE: AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB:					Check if you would like to receive the electronic USA Swimming Newsletter (must be 13 years of age or older)		
SIGN HERE X						ago or ordor)	
SIGNATURE C	OF ATHLETE, PARENT OR GUA	ARDIAN	DATE	REG. DATE/LS	C USE ONLY		

Form can be saved to your computer, completed, saved again, and then printed or attached to an email. If using a Mac, select 'Print' and then 'Save as PDF' before attaching. Application is not complete until payment (by check or credit card) has been received. Payment can be made by credit card through the Payment Center at www.virginiaswimming.org.