

## 2019 SEASONAL ATHLETE REGISTRATION APPLICATION LSC: VIRGINIA SWIMMING

CHECK APPROPRIATE SEASONAL PERIOD: SEASON 1: March 15, 2019 - Aug. 8, 2019

PLEASE PRINT | EGIBLY COMPLETE ALL INFORMATION

THIS MEMBERSHIP IS ONLY FOR MEETS BELOW ZONE, SECTIONAL AND NATIONAL LEVELS.

LAST NAME	LEGAL FIRS	ST NAME	MIDDLE NAME
PREFERRED NAME DATE OF BIR	TH (MMDDYY) SEX (M/F) AGE	CLUB CODE	NAME OF CLUB YOU REPRESENT
(Bill, Beth, Scooter, Liz, Bobby)			with a club, enter "Unattached"
GUARDIAN #1 LAST NAME GUARDIAN	N #1 FIRST NAME	GUARDIAN #2 LAST	NAME GUARDIAN #2 FIRST NAME
MAILING A	DDRESS		
			U.S. CITIZEN: YES NO
CITY	STATE	ZIP CODE	
		_	ARE YOU A MEMBER OF ANOTHER FINA
AREA CODE TELEPHONE NO.		OLD E-MAIL ADDRESS	FEDERATION? I YES INO
	FAMIL T/HOUSEN	ULD E-MAIL ADDRESS	IF YES, WHICH FEDERATION:
OPTIONAL MAKE CHECK PAYABLE TO:			HAVE YOU REPRESENTED THAT
DISABILITY: RACE AND ETHNICITY (You may Contact Club for Details			FEDERATION AT INTERNATIONAL
A. Legally Blind or Visually Impaired check up to two choices):			COMPETITION?  VES  NO
B. Deaf or Hard of Hearing       Q. Black or African Americ         C. Physical Disability such as       R. Asian		N & PAYMENT TO:	
amputation, cerebral palsy, S. White	Contact Club		2019 REGISTRATION FEE
dwarfism, spinal injury,          T. Hispanic or Latino        mobility impairment          U. American Indian & Alas			USA Swimming Fee \$30.0
mobility impairment       U. American Indian & Alas         D. Cognitive Disability such as       V. Some Other Race	ka Native		LSC Fee 12.0
severe learning disorder, U. Native Hawaiian & Othe	er Pacific		TOTAL DUE 42.0
autism Islander			TOTAL DOE 42.0
HIGH SCHOOL STUDENTS – Year of high school graduation:			
5 5			Check if you would like to learn more about the USA
YEAR LAST REGISTERED: IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2016, ENTER THAT CLUB CODE: LSC CODE: AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB: .			Swimming Foundation's initiatives Check if you would like to receive the electronic USA
CLUB CODELSC CODE:AND THE DATE OF YOU	CLAST COMPETITION REPRESENTIN		Swimming Newsletter (must be 13 years of age or old
SIGN			
HERE X SIGNATURE OF ATHLETE, PARENT O		DATE	REG. DATE/LSC 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 through the Payment Center at <u>www.virginiaswimming.org</u>.