



USA SWIMMING

2018 OUTREACH ATHLETE REGISTRATION APPLICATION

*FIRST TIME APPS: Must show ORIGINAL birth cert or PASSPORT

LSC: San Diego-Imperial Swimming

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

(Bill, Beth, Scooter, Liz, Bobby) If not affiliated with a club, enter "Unattached"

GUARDIAN #1 LAST NAME	GUARDIAN #1 FIRST NAME	GUARDIAN #2 LAST NAME	GUARDIAN #2 FIRST NAME

MAILING ADDRESS

CITY	STATE	ZIP CODE

AREA CODE	TELEPHONE NO.	FAMILY/HOUSEHOLD E-MAIL ADDRESS

U.S. CITIZEN: YES NO

ARE YOU A MEMBER OF ANOTHER FINA FEDERATION? YES NO

IF YES, WHICH FEDERATION: _____

HAVE YOU REPRESENTED THAT FEDERATION AT INTERNATIONAL COMPETITION? YES NO

OPTIONAL	
DISABILITY: <input type="checkbox"/> A. Legally Blind or Visually Impaired <input type="checkbox"/> B. Deaf or Hard of Hearing <input type="checkbox"/> C. Physical Disability such as amputation, cerebral palsy, dwarfism, spinal injury, mobility impairment <input type="checkbox"/> D. Cognitive Disability such as severe learning disorder, autism	RACE AND ETHNICITY (You may check up to two choices): <input type="checkbox"/> Q. Black or African American <input type="checkbox"/> R. Asian <input type="checkbox"/> S. White <input type="checkbox"/> T. Hispanic or Latino <input type="checkbox"/> U. American Indian & Alaska Native <input type="checkbox"/> V. Some Other Race <input type="checkbox"/> W. Native Hawaiian & Other Pacific Islander

MAKE CHECK PAYABLE TO:

San Diego-Imperial Swimming

MAIL APPLICATION & PAYMENT TO:

**San Diego-Imperial Swimming
PO Box 1347**

Fallbrook, CA 92088 760-525-3748

office@si-swimming.org www.si-swimming.com

2018 OUTREACH FEE	
Sept. 1, 2017 through Dec. 31, 2018	
USA Swimming Fee	\$5.00
LSC Fee	\$2.00
TOTAL DUE	\$7.00

APPROPRIATE PAPER WORK SHOWING LSC QUALIFICATIONS FOR THIS OUTREACH REGISTRATION MUST BE ATTACHED TO THIS FORM IN ORDER TO PROPERLY REGISTER THIS ATHLETE.

HIGH SCHOOL STUDENTS – Year of high school graduation: _____

YEAR LAST REGISTERED: _____. IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2017, ENTER THAT CLUB CODE: _____ LSC CODE: _____ AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB: _____.

- 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)

SIGN HERE x _____
 SIGNATURE OF ATHLETE, PARENT OR GUARDIAN _____ DATE _____

REG. DATE/LSC USE ONLY _____