



**USA SWIMMING**

**2009 SEASONAL ATHLETE REGISTRATION APPLICATION**

**LSC: GULF SWIMMING**

REG. DATE / OFFICE USE ONLY

CHECK APPROPRIATE SEASONAL PERIOD:

SEASON 1  SEASON 2  INDIVIDUAL SEASON

REG. DATE / OFFICE USE ONLY

*THIS MEMBERSHIP IS ONLY FOR MEETS BELOW ZONE, 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

FATHER/GUARDIAN LAST NAME FATHER/GUARDIAN FIRST NAME MOTHER/GUARDIAN LAST NAME MOTHER/GUARDIAN FIRST NAME

MAILING ADDRESS

CITY STATE ZIP CODE

AREA CODE TELEPHONE NO.

U.S. CITIZEN?  YES  NO

ARE YOU A MEMBER OF ANOTHER FINA FEDERATION?  YES  NO

IF YES, WHICH FEDERATION:

**DISABILITY:**

- A. Legally Blind or Visually Impaired
 B. Deaf or Hard of Hearing
 C. Physical Disability such as amputation, cerebral palsy, dwarfism, spinal injury, mobility impairment
 D. Cognitive Disability such as mental retardation, severe learning disorder, autism

**RACE AND ETHNICITY** (You may make up to two choices if appropriate):

- Q. Black or African American
 R. Asian
 S. White
 T. Hispanic or Latino
 U. American Indian & Alaska Native
 V. Some Other Race
 W. Native Hawaiian & Other Pacific Islander

**MAKE CHECK PAYABLE TO:**

**GULF SWIMMING**

**MAIL APPLICATION & PAYMENT TO:**

ANNETTE LEACH
51 QUIET OAK CIRCLE
THE WOODLANDS, TX 77381
E-MAIL: AnetLeach@aol.com
281-367-6948

REGISTRATION FEE table with rows: USA Swimming Fee \$25.00, LSC Fee 10.00, TOTAL DUE 35.00

YEAR LAST REGISTERED: \_\_\_\_\_

SIGN HERE x SIGNATURE OF ATHLETE, PARENT OR GUARDIAN

USA Swimming occasionally makes its membership list available to its marketing partners. Please notify USA Swimming's Member Services Dept. at 719/866-4578 if you do not wish to receive these mailings.

CHECK IF YOU WOULD LIKE TO LEARN MORE ABOUT USA SWIMMING'S COMMUNITY INITIATIVES