



PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

Form fields for personal 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. Includes a note: (Bill, Beth, Scooter, Liz, Bobby) and 'If not affiliated with a club, enter "Unattached"'

NOTE: If you are 18 years of age or older, you are required to abide by to the Minor Athlete Abuse Prevention Policy. In addition, in order to be a member in good standing you must complete the Athlete Protection Training. The training can be accessed at www.usaswimming.org/apt

Form fields for guardian and contact information: 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 and RACE AND ETHNICITY section. Includes checkboxes for Legally Blind or Visually Impaired, Deaf or Hard of Hearing, Physical Disability, Cognitive Disability, and various racial/ethnic categories.

MAKE CHECK PAYABLE TO:

MAIL APPLICATION & PAYMENT TO: Southern California Swimming, 28000 S. Western Ave. #226, San Pedro, CA 90732, Email: officemanager@socalswim.org, 310-684-1151

2020 REGISTRATION FEE table: Sept. 1, 2019 through Dec. 31, 2020. USA Swimming Fee \$62.00, LSC Fee \$8.00, TOTAL DUE \$70.00

HIGH SCHOOL STUDENTS - Year of high school graduation: _____
YEAR LAST REGISTERED: _____. IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2019, 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 _____