



**USA SWIMMING**

**2009 ATHLETE REGISTRATION APPLICATION  
LSC: GULF SWIMMING**

REGISTRATION DATE  
OFFICE USE ONLY

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:**

**TEAM**

**MAIL APPLICATION & PAYMENT TO:**

**Annette Leach  
51 Quiet Oak Circle  
The Woodlands, TX 77381  
Email: AnetLeach@aol.com  
281-367-6948**

**REGISTRATION FEE**

USA Swimming Fee	\$45.00
LSC Fee	20.00
<b>TOTAL DUE</b>	<b>\$65.00</b>

*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.*

YEAR LAST REGISTERED . IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2008, ENTER THAT CLUB CODE LSC CODE AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB / /

SIGN HERE X SIGNATURE OF ATHLETE, PARENT OR GUARDIAN

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