

## 2018 ATHLETE REGISTRATION APPLICATION LSC: MIDWESTERN 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 CI	LUB YOU REPRESENT		
(Bill, Beth, Scooter, Liz, Bobby) GUARDIAN #1 LAST NAME	GUARDIAN #1 FIRST N		vith a club, enter "	Unattached" GUARDIAN #2 FIRST NA	AME	
	MAILING ADDRESS					
			us cr	U.S. CITIZEN: ☐ YES ☐ NO		
CITY	STA	ATE ZIP CODE				
		_		OU A MEMBER OF ANOTH	IER FINA	
AREA CODE TELEPH	IONE NO.	FAMILY/HOUSEHOLD E-MAIL ADDRESS		RATION?   YES   NO		
				, WINCH FEDERATION.		
OPTIONAL DISABILITY: A Legally Blind or Visually Impaired check up to two choices): B Deaf or Hard of Hearing C Black or African American  MAKE CHECK PAYABLE TO: YOUR CLUB			HAVE YOU REPRESENTED THAT FEDERATION AT INTERNATIONAL COMPETITION?   YES   NO			
☐ C. Physical Disability such as ☐ R. Asian amputation, cerebral palsy, ☐ S. White		MAIL APPLICATION & PAYMENT TO:		2018 REGISTRATION	ON FEE	
dwarfism, spinal injury, mobility impairment  □ D. Cognitive Disability such as severe learning disorder,  □ W.	Hispanic or Latino American Indian & Alaska Native Some Other Race Native Hawaiian & Other Pacific	YOUR CLUB REGISTRAR		Sept. 1, 2017 through Do USA Swimming Fee LSC Fee	\$58.00 \$ 8.00	
autism	Islander			TOTAL DUE	\$66.00	
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 ATH	LETE, PARENT OR GUARDIAI	N DATE	REG. DATE/LSG	C USE ONLY		