



REG. DATE / OFFICE USE ONLY

REGISTRATION DATE grid

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

Registration form fields: LAST NAME, LEGAL FIRST NAME, MIDDLE NAME

Have you ever been a member of USA Swimming under a different last name? If yes, please provide that name:
Previously registered with USA Swimming? Yes No If registered in a different LSC, which LSC:

Registration form fields: PREFERRED NAME, DATE OF BIRTH (MO/DAY/YR), SEX (M-F), CLUB CODE, CLUB NAME

Registration form field: MAILING ADDRESS

Registration form fields: CITY, STATE, ZIP CODE

Registration form fields: HOME, WORK, FAX, CELL telephone numbers with area codes and extensions

Registration form field: E-MAIL ADDRESS

- CHECK ALL THAT APPLY:
1. Coach-Full Time (primary income is from coaching) Coach-Part Time (primary income is NOT from coaching) Official Other
COACHES - Provide proof of the following current safety certifications: CPR, First Aid and Safety Training for Swim Coaches
NOTE - All coaches must have a current USA Swimming background screen
First year coaches must meet the education requirement before renewing for the second year
2. If coach, primary age group that you coach (may be more than one): 10-Un 11-12 13-14 15-18 19+ Masters
3. Race and Ethnicity: 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 (You may make up to two choices if appropriate.)

IF FAMILY MEMBERSHIP, PLEASE COMPLETE THESE LINES FOR THE SECOND NON-ATHLETE FAMILY MEMBER:

Registration form fields for second family member: LAST NAME, LEGAL FIRST NAME, MIDDLE NAME

Have you ever been a member of USA Swimming under a different last name? If yes, please provide that name:
Previously registered with USA Swimming? Yes No If registered in a different LSC, which LSC:

Registration form fields for second family member: PREFERRED NAME, DATE OF BIRTH (MO/DAY/YR), SEX (M-F), CLUB CODE, CLUB NAME

Registration form fields for second family member: WORK, FAX, CELL telephone numbers with area codes and extensions

Registration form field for second family member: E-MAIL ADDRESS

- CHECK ALL THAT APPLY:
1. Coach-Full Time (primary income is from coaching) Coach-Part Time (primary income is NOT from coaching) Official Other
COACHES - Provide proof of the following current safety certifications: CPR, First Aid and Safety Training for Swim Coaches
NOTE - All coaches must have a current USA Swimming background screen
First year coaches must meet the education requirement before renewing for the second year
2. If coach, primary age group that you coach (may be more than one): 10-Un 11-12 13-14 15-18 19+ Masters
3. Race and Ethnicity: 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 (You may make up to two choices if appropriate.)

MAKE CHECK PAYABLE TO:

GULF SWIMMING

MAIL APPLICATION & PAYMENT TO:

CHRIS DAY
5707 WOODLAND BROOK DRIVE
KINGWOOD, TX 77346
E-MAIL: ccd@msn.com
281-360-2610

REGISTRATION FEE table with columns: USA Swimming Fee, LSC Fee, TOTAL DUE. Rows: Individual (\$46.00 + 15.00 = \$61.00), Family (\$90.00 + 20.00 = \$110.00), Life (\$1,000.00 + 10.00 = \$1,010.00)

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
Check if you would like to receive the electronic USA Swimming Newsletter