



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 instruction: (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, MEMBER'S EMAIL 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: [ ] 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 severe learning disorder, autism. RACE AND ETHNICITY (You may check up to two choices): [ ] 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: Your Club Team or Gulf Swimming MAIL APPLICATION & PAYMENT TO: Your Club Team or if Unattached Gulf Swimming Attention: Membership 1415 South Voss Road, Suite 110-355 Houston, Texas 77057

Table with 2 columns: Fee Description, Amount. Row 1: 2020 OUTREACH FEE, Sept. 1, 2019 through Dec. 31, 2020. Row 2: USA Swimming Fee, \$5.00. Row 3: LSC Fee. Row 4: TOTAL DUE, \$5.00

APPROPRIATE PAPER WORK SHOWING LSC QUALIFICATIONS FOR THIS OUTREACH REGISTRATION MUST BE ATTACHED TO THIS FORM IN ORDER TO PROPERLY REGISTER THIS ATHLETE.

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