

**USA SWIMMING  
NATIONAL AGE GROUP SWIMMING RECORD APPLICATION**

Application Date: \_\_\_\_\_

\_\_\_\_\_  
Name of Athlete (or club if relay)      Age      Birthdate      Sex

\_\_\_\_\_  
Address      City      State      Zip Code

\_\_\_\_\_  
Unique ID#      Citizenship      LSC

\_\_\_\_\_  
Club Affiliation      Coach

Event: \_\_\_\_\_  
Stroke and Distance      Yards or Meters      Time

\_\_\_\_\_  
Name of Meet      Dates of Meet      Date of swim

\_\_\_\_\_  
Location of Meet      Host LSC

For relay's, list the names, ages, and USA Swimming registration # for all four swimmers.

1. \_\_\_\_\_ 2. \_\_\_\_\_

Unique ID# \_\_\_\_\_ Unique ID# \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

Unique ID# \_\_\_\_\_ Unique ID# \_\_\_\_\_

This signature certifies that the applicant is a U.S. citizen and that the reported time conforms to USA Swimming regulations! Attach a copy of the meet result sheet signed by the meet referee or His/her designated official.

Signature: Meet Referee \_\_\_\_\_  
LSC Records Chairperson (name) \_\_\_\_\_  
Address \_\_\_\_\_  
Phone: \_\_\_\_\_

Mail to: Isabelle Fraser  
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