USA SWIMMING

REG. DATE / OFFICE USE ONLY

2011 NON-ATHLETE REGISTRATION APPLICATION
LSC: FLORIDA SWIMMING, INC.

By becoming a member of USA Swimming, I hereby agree to abide by the rules, regulations and Code of Conduct of USA Swimming.

PLEASE PRINT LEGIBLY ● COMPLETE ALL INFORMATION:

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: _____

PREFERRED NAME | DATE OF BIRTH (MO/DAY/YR) (Required) | SEX (M-F) | CLUB CODE | CLUB NAME

MAILING ADDRESS

CITY | STATE | ZIP CODE

HOME AREA CODE TELEPHONE NO. | WORK AREA CODE TELEPHONE NO. EXTENSION | FAX AREA CODE TELEPHONE NO. | CELL AREA CODE TELEPHONE NO.

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 ☐ **Certified Official** ☐ **Other**

LSC REGISTRAR USE ONLY – enter expiration date of each course
_____**CPR** _____**First Aid** _____**Safety Training** *(Proof of all safety certifications must accompany this form)*
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:

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: _____

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MAKE CHECK PAYABLE TO:

FLORIDA SWIMMING, INC.

MAIL APPLICATION & PAYMENT TO:

Florida Swimming, Inc.
214 E. Washington Street, Suite B
Minneola, FL 34715
FLSOffice2@aol.com
(O) 352-242-5145 (F) 352-242-5245

REGISTRATION FEE

	USA Swimming Fee		LSC Fee		TOTAL DUE
☐ Individual	$47.00	+	$10.00	=	$57.00
☐ Family	$92.50	+	$10.00	=	$102.50
☐ 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 the USA Swimming Foundation's initiatives
☐ Check if you would like to receive the electronic USA Swimming Newsletter