



Email: office@si-swimming.com
Ph #: 760-525-3748

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 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 EMAIL ADDRESS, MEMBER'S EMAIL ADDRESS

Enter athlete's email if 17 yr or older

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

2021 REGISTRATION FEE June 1, 2020 through December 31, 2021. Table showing USA Swimming Fee (\$64.00) + LSC Fee (\$10.00) = TOTAL DUE (\$74.00)

MAKE CHECK PAYABLE TO:

MAIL APPLICATION & PAYMENT TO:

LFJCC

LFJCC
4126 Executive Dr.
La Jolla, CA 92037

HIGH SCHOOL STUDENTS - Year of high school graduation: \_\_\_\_\_

YEAR LAST REGISTERED: \_\_\_\_\_. IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2020, 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 \_\_\_\_\_



Email: office@si-swimming.com

Ph #: 760-525-3748

Athlete must be 18-Under

There is a two sanctioned meet limit on this membership

THIS MEMBERSHIP IS ONLY FOR MEETS THAT ARE BELOW THE LSC CHAMPIONSHIP, ZONE, SECTIONAL AND NATIONAL LEVELS.

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Form with fields for 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 EMAIL ADDRESS, MEMBER'S EMAIL ADDRESS. Includes instruction: Enter athlete email if 17 years or older

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

2021 REGISTRATION FEE June 1, 2020 through December 31, 2021. USA Swimming Fee \$10.00, LSC Fee \$10.00, Total due: \$20.00

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REG. DATE/LSC USE ONLY \_\_\_\_\_