



# USA SWIMMING – 2017 ORGANIZATION APPLICATION

FOR USE 9/1/2016 thru 8/30/2017

FEE \$95.00

Organizational membership is only available for those entities that are actively involved in hosting USA Swimming activities.

ORGANIZATION CODE: \_\_\_\_\_ ORGANIZATION NAME: \_\_\_\_\_

ARE YOU AFFILIATED WITH A USA SWIMMING CLUB? ☐ Yes ☐ No

IF YES, CLUB CODE: \_\_\_\_\_ CLUB NAME: \_\_\_\_\_

## PLEASE CHECK ONE:

☐ NEW ORGANIZATION

☐ RENEWING ORGANIZATION

(Organization is defined as a group without athletes and coaches. Insurance is only provided for activities which have been approved by USA Swimming's Risk Management Director or insurance broker, Risk Management Services. After approval, Risk Management Services can issue a certificate of insurance. Please contact Kim Tate (ext. 10) or Sandi Blumit (ext. 12) at 1-800-777-4930. **Seasonal clubs cannot be organizations.**)

FIRST YEAR AS A USA SWIMMING ORGANIZATION: \_\_\_\_\_

NEAREST MAJOR CITY: \_\_\_\_\_ ORGANIZATION WEB SITE: \_\_\_\_\_

## PRIMARY CONTACT PERSON:

CONTACT: \_\_\_\_\_

POSITION (President, Director, etc.): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ BUSINESS: \_\_\_\_\_ MOBILE: \_\_\_\_\_

FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

## PRIMARY PURPOSE OF YOUR ORGANIZATION:

☐ BOOSTER CLUB

☐ SWIM LEAGUE

☐ OTHER

DO YOU PLAN TO RUN FUNDRAISERS? ☐ YES ☐ NO

DO YOU PLAN TO RUN SWIM MEETS? ☐ YES ☐ NO

## REGISTRATION DATE

REGISTRATION DATE: \_\_\_\_\_ (For LSC Office Use Only)

## FOR LEAGUES, MEMBER CLUBS OF YOUR ORGANIZATION:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

*If any of the above information changes, please notify your LSC Registration Chair.*