



USA SWIMMING

2019 SINGLE-MEET OPEN WATER ATHLETE APPLICATION

NAME OF MEET/DATE(S)

LSC: NC

THIS MEMBERSHIP IS ONLY FOR MEETS BELOW ZONE, SECTIONAL AND NATIONAL LEVELS.

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

LAST NAME	LEGAL FIRST NAME	MIDDLE NAME
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PREFERRED NAME	DATE OF BIRTH (MO/DAY/YR)	SEX (M/F)	AGE
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(Bill, Beth, Scooter, Liz, Bobby) GUARDIAN #1 LAST NAME	/GUARDIAN #1 FIRST NAME	GUARDIAN #2 LAST NAME	GUARDIAN #2 FIRST NAME
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MAILING ADDRESS

CITY	STATE	ZIP CODE
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AREA CODE	TELEPHONE NO.	FAMILY/HOUSEHOLD E-MAIL ADDRESS
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U.S. CITIZEN: YES NO

ARE YOU A MEMBER OF ANOTHER FINA FEDERATION? YES NO

IF YES, WHICH FEDERATION: _____

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:

NC Swimming

MAIL APPLICATION & PAYMENT TO:

**Registrar, NC Swimming
PO Box 30863
Charlotte, NC 28230**

HAVE YOU REPRESENTED THAT FEDERATION AT INTERNATIONAL COMPETITION? YES NO

2019 REGISTRATION FEE	
USA Swimming Fee	\$10.00
LSC Fee	\$10.00
TOTAL DUE	\$20.00

HIGH SCHOOL STUDENTS – Year of high school graduation: _____

YEAR LAST REGISTERED: _____

SIGN HERE x _____
SIGNATURE OF ATHLETE, PARENT OR GUARDIAN

DATE

REG. DATE/LSC USE ONLY _____

- 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)