



**2020 INDIVIDUAL SEASON ATHLETE REGISTRATION  
LSC: NC**

**THIS MEMBERSHIP IS ONLY FOR MEETS BELOW ZONE, SECTIONAL AND NATIONAL LEVELS.  
VALID FOR 150 DAYS**

PLEASE PRINT LEGIBLY ● COMPLETE ALL 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	
(Bill, Beth, Scooter, Liz, Bobby)		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](http://www.usaswimming.org/apt)**

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 E-MAIL ADDRESS	ATHLETE'S EMAIL ADDRESS

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	
<b>DISABILITY:</b> <input type="checkbox"/> A. Legally Blind or Visually Impaired <input type="checkbox"/> B. Deaf or Hard of Hearing <input type="checkbox"/> C. Physical Disability such as amputation, cerebral palsy, dwarfism, spinal injury, mobility impairment <input type="checkbox"/> D. Cognitive Disability such as severe learning disorder, autism	<b>RACE AND ETHNICITY</b> (You may check up to two choices): <input type="checkbox"/> Q. Black or African American <input type="checkbox"/> R. Asian <input type="checkbox"/> S. White <input type="checkbox"/> T. Hispanic or Latino <input type="checkbox"/> U. American Indian & Alaska Native <input type="checkbox"/> V. Some Other Race <input type="checkbox"/> W. Native Hawaiian & Other Pacific Islander

**MAKE CHECK PAYABLE TO:**  
**NORTH CAROLINA SWIMMING**  
**MAIL APPLICATION & PAYMENT TO:**  
**Registrar, NC Swimming**  
**PO Box 30863**  
**Charlotte, NC 28230**

<b>2020 REGISTRATION FEE</b>	
<b>TOTAL DUE</b>	<b>\$40.00</b>

HIGH SCHOOL STUDENTS – Year of high school graduation: \_\_\_\_\_  
 YEAR LAST REGISTERED: \_\_\_\_\_. IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2019, 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 \_\_\_\_\_