USA SWIMMING

2015 NON-ATHLETE REGISTRATION APPLICATION

LSC: *Pacific Northwest Swimming* **(PN)**

PLEASE PRINT LEGIBLY ● COMPLETE ALL INFORMATION TO ENSURE THAT CONTACT INFORMATION IS CORRECT AND UP TO DATE:

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)	SEX (M-F)	CLUB CODE	CLUB NAME
(Bill, Beth, Scooter, Liz, Bobby)	(Required)		If not affiliated with a club, enter "Unattached"	

MAILING ADDRESS

CITY	STATE	ZIP CODE
		–

	AREA CODE	TELEPHONE NO.	EXTENSION
HOME			
WORK			
FAX			
MOBILE			

E-MAIL ADDRESS

IF ANY OF THE ABOVE INFORMATION CHANGES DURING THE YEAR – PLEASE NOTIFY YOUR LSC REGISTRATION/MEMBERSHIP PERSON OF THE CHANGES

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

CITIZENSHIP/FINA:

U.S. Citizen: ☐ Yes ☐ No

Are you a member of another FINA federation: ☐ Yes ☐ No

If Yes, which federation: _____

☐ 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

MEMBERSHIP CODE: *Check all that apply*

☐ **Coach-Full Time** (Employed full time as a coach)	Requires a Level 2 Background Check & Athlete Protection Training
☐ **Coach-Part Time** (Primary employment is NOT coaching)	Requires a Level 2 Background Check & Athlete Protection Training
☐ **Certified Official** (Starter, Stroke & Turn, Meet Referee, Administrative, etc.)	Requires a Level 2 Background Check & Athlete Protection Training
☐ **Other** (Chaperone, Meet Director, Meet Manager, etc.)	Requires a Level 1 Background Check & Athlete Protection Training

If coach, primary age group that you coach (may be more than one): ☐ 10-Un ☐ 11-12 ☐ 13-14 ☐ 15-18 ☐ 19+ ☐ Masters

ALL NON-ATHLETES must have a current USA Swimming Background Check and Athlete Protection Training
BGC at www.usaswimming.org/backgroundcheck APT at www.usaswimming.org/protect
COACHES: Also requires current CPR/AED & Safety Training for Swim Coaches certifications
EDUCATION REQUIREMENT FOR COACHES at usaswimming.org/FOC**:**

- An individual registering as a coach for the first time must complete the online Foundations of Coaching 101 test prior to becoming a Coach Member.
- Prior to registering as a coach for the second year, the online tests for Foundations of Coaching 201 **and** Rules and Regulations must be completed.

ACCEPTABLE SAFETY REQUIREMENT COURSES AND ONLINE TESTS ARE AVAILABLE AT www.usaswimming.org/coachmember

☐ **CHECK IF APPLYING FOR A FAMILY MEMBERSHIP – ATTACH A SECOND COMPLETED NON-ATHLETE APPLICATION FOR THE SECOND FAMILY MEMBER**

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

_____

Signature Date

By signing this application I verify that the above is true and correct.

2015 REGISTRATION FEE

September 1, 2014 through December 31, 2015

	USA Swimming Fee	+	LSC Fee	=	TOTAL DUE
☐ Individual	$52.00	+	$10.00	=	**$62.00**
☐ Family	$104.00	+	$10.00	=	**$114.00**
☐ Life	$1,000.00	+	$10.00	=	**$1010.00**

MAKE CHECK PAYABLE TO:

PACIFIC NORTHWEST SWIMMING

MAIL APPLICATION & PAYMENT TO:

501 30TH STREET N.E., Suite E
AUBURN, WA 98002

FOR LSC REGISTRAR USE ONLY: REGISTRATION DATE_____

BGC_____ APT_____ STSC _____ LG_____+ ONLINE ST TEST _____

CPR_____ FOC 101_____ FOC 201 _____ Rules & Regs _____ Y Principles _____