

2017 ATHLETE REGISTRATION APPLICATION

LSC: IN (Indiana): membership valid 9.1.16-12.31.17

PLEASE PRINT LEGIBLY LAS	LEGAL FIRST NAME				MIDDLE NAME					
PREFERRED NAME		DATE OF BIRTH (MO/DA	Y/YR) SEX (M/F)	R) SEX (M/F) AGE CLUB CODE		NA	NAME OF CLUB YOU REPRESENT			
			ı II II	,						
(Bill, Beth, Scooter, Liz, Bobby) GUARDIAN #1 LAST NAME		GUARDIAN #1 FIRS	T NAME		If not affilia		ub, enter '	Unattached"	N #2 FIRST N	AME
		MAILING ADDRESS	3							
							U.S. CITIZEN: ☐ YES ☐ NO			
	CITY	•	STATE		ZIP CODE		0.3. 0	IIZLIN. [_ 1E3 N	J
					_		ARI	E YOU A	A MEME	BER OF
AREA CODE TELEPH		ONE NO.	FAMILY/HOUSEHOLD E-MAIL ADDRESS			ss	ANOTHER FINA			
									YES □ NO	
	MAKE CHECK PAYABLE TO:				IF YES, WHICH FEDERATION:					
DISABILITY:		AND ETHNICITY (You may			ss Unattached (Indiana				
☐ A. Legally Blind or Visually Imp☐ B. Deaf or Hard of Hearing		o to two choices): Black or African American	Swimmin	ıq)		illulalla				
C. Physical Disability such as amputation, cerebral palsy,			MAIL APPL	CATIO	N & PAYMENT TO:			2017	REGISTRAT	ION FEE
dwarfism, spinal injury,	□ T. H	lispanic or Latino	YOUR CL	UB				Sept. 1, 2	016 through D	ec. 31, 2017
mobility impairment ☐ D. Cognitive Disability such as	s □V.S	merican Indian & Alaska Native ome Other Race	If unattac		sent to:				mming Fee	\$56.00
severe learning disorder, autism		Native Hawaiian & Other Pacific slander	Indiana S		•			1	DUE	\$7.00 \$63.00
HIGH SCHOOL STUDENTS Voor	201 S Capitol Ave, Suite 410 Indianapolis,. IN 46225					101742				
HIGH SCHOOL STUDENTS – Year of high school graduation: INGIANAPOIIS,. IN 46225 YEAR LAST REGISTERED: IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2016, ENTER THAT							Check if you would like to learn more about the USA Swimming Foundation's initiatives			
	MPETITION REPRESENTING THAT CLUB:				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			

<u>This form is to be returned to YOUR CLUB with payment.</u> Your club will send one payment to our office for all registrations submitted. Only if you are a true unattached athlete (you do NOT belong to a club) should you send this completed form with payment directly to our offices.

Birth Certificate Copy Needed: ****Since 2010, Indiana Swimming has required all 18 and younger swimmers to submit a <u>COPY of their birth certificate</u> to their club registrar. Swimmers who do not submit a copy of the birth certificate and subsequently swim in meets will be assessed a \$100 per meet fine for non-compliance/confirmation of age. Once Indiana Swimming has confirmed the swimmer's membership with date of birth confirmation, the swimmer will NOT have to re-submit. If you are unsure if Indiana Swimming has your date of birth confirmed from a previous year's membership, please e-mail <u>Michele@inswimming.org</u>. **Indiana Swimming does accept other forms of date of birth confirmation. Please see CLUB FORMS section of the website for the Birth Certificate Requirements document.

QUESTIONS regarding your club practices, times, fees, ect need to be directed to your club, not our offices.

This form should be completed for EVERY ATHLETE MEMBER of Indiana Swimming. Completing these forms is a requirement of USA Swimming and gives your club liability insurance and your swimmer some secondary accident insurance. Clubs should keep these signed forms in the club files. Clubs are asked to submit team management software files (Team Manager or Team Unify) to register the athletes. Please e-mail michele@inswimming.org for questions/details.