



REG. DATE / OFFICE USE ONLY

REGISTRATION DATE grid

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

LAST NAME, LEGAL FIRST NAME, MIDDLE NAME fields

Have you ever been a member of USA Swimming under a different last name? If yes, please provide that name:
Registered last year? 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 fields

MAILING ADDRESS field

CITY, STATE, ZIP CODE fields

HOME, WORK, FAX telephone fields (AREA CODE, TELEPHONE NO., EXTENSION)

E-MAIL ADDRESS field

CIRCLE ALL THAT APPLY:

- 1. A. Coach-Full Time (primary income is from coaching) B. Coach-Part Time (primary income is NOT from coaching) C. Official D. Other

LSC REGISTRATION USE ONLY - ENTER EXPIRATION DATE OF EACH COURSE
COACHES SAFETY CURRICULUM: CPR, FIRST AID, SAFETY TRAINING, EDUCATION REQ. (Yes/No/Grandfathered)

- 2. If coach, primary age group that you coach (may be more than one): F. 10-Un G. 11-12 H. 13-14 I. 15-18 J. 19+ K. Masters
3. Ethnicity: Q. African American R. Asian or Pacific Islander S. Caucasian T. Hispanic U. Native American V. Other W. Decline (In accordance with U.S. Census Bureau guidelines, you may make up to two choices if appropriate.)

F FAMILY MEMBERSHIP, PLEASE COMPLETE THESE LINES FOR THE SECOND NON-ATHLETE FAMILY MEMBER:

LAST NAME, LEGAL FIRST NAME, MIDDLE NAME fields

Have you ever been a member of USA Swimming under a different last name? If yes, please provide that name:
Registered last year? 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 fields

WORK, FAX telephone fields (AREA CODE, TELEPHONE NO., EXTENSION)

E-MAIL ADDRESS field

CIRCLE ALL THAT APPLY:

- 1. A. Coach-Full Time (primary income is from coaching) B. Coach-Part Time (primary income is NOT from coaching) C. Official D. Other

LSC REGISTRATION USE ONLY - ENTER EXPIRATION DATE OF EACH COURSE
COACHES SAFETY CURRICULUM: CPR, FIRST AID, SAFETY TRAINING, EDUCATION REQ. (Yes/No/Grandfathered)

- 2. If coach, primary age group that you coach (may be more than one): F. 10-Un G. 11-12 H. 13-14 I. 15-18 J. 19+ K. Masters
3. Ethnicity: Q. African American R. Asian or Pacific Islander S. Caucasian T. Hispanic U. Native American V. Other W. Decline (In accordance with U.S. Census Bureau guidelines, you may make up to two choices if appropriate.)

MAKE CHECK PAYABLE TO:

PACIFIC SWIMMING

MAIL APPLICATION & PAYMENT TO:

PACIFIC SWIMMING MEMBERSHIP
1374 LUPINE COURT
CONCORD, CA 94521
E-MAIL: laurie4pc@aol.com
325/686/1286

REGISTRATION FEE table with columns: USA Swimming Fee, LSC Fee, TOTAL DUE. Rows include Individual, Family, Sports Med., Sustaining, Life fees.

USA Swimming occasionally makes its membership list available to its marketing partners. Please notify USA Swimming's Member Services Dept. at 719/866-4578 if you do not wish to receive these mailings. ANNUAL MEMBERSHIP DUES OF \$41.00 OR MORE INCLUDE \$2 FOR A 1-YEAR SUBSCRIPTION TO SPLASH.