



USA SWIMMING

2018 SINGLE-MEET OPEN WATER ATHLETE APPLICATION

LSC: CONNECTICUT SWIMMING - CT

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

NAME OF MEET/DATE(S)

[Empty box for meet name]

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

LAST NAME

[Empty box for last name]

LEGAL FIRST NAME

[Empty box for legal first name]

MIDDLE NAME

[Empty box for middle name]

PREFERRED NAME

[Empty box for preferred name]

DATE OF BIRTH (MO/DAY/YR)

[Empty boxes for date of birth]

SEX (M/F)

[Empty box for sex]

AGE

[Empty box for age]

(Bill, Beth, Scooter, Liz, Bobby)

GUARDIAN #1 LAST NAME

[Empty box for guardian #1 last name]

/GUARDIAN #1 FIRST NAME

[Empty box for guardian #1 first name]

GUARDIAN #2 LAST NAME

[Empty box for guardian #2 last name]

GUARDIAN #2 FIRST NAME

[Empty box for guardian #2 first name]

MAILING ADDRESS

[Empty box for mailing address]

CITY

[Empty box for city]

STATE

[Empty box for state]

ZIP CODE

[Empty box for zip code]

AREA CODE

[Empty box for area code]

TELEPHONE NO.

[Empty box for telephone number]

FAMILY/HOUSEHOLD E-MAIL ADDRESS

[Empty box for 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

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:

Connecticut Swimming, Inc.

MAIL APPLICATION & PAYMENT TO:

Connecticut Swimming, Inc.
c/o Ginger McCurdy
28 Farms Village Rd.
Wethersfield, CT 06109

2018 REGISTRATION FEE

Table with 2 columns: Fee Name, Amount. Rows: USA Swimming Fee \$10.00, LSC Fee 2.00, TOTAL DUE \$12.00

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)