

## 2017 NON-ATHLETE REGISTRATION APPLICATION LSC: VIRGINIA SWIMMING

PLEASE PRINT LEGIBLY   COMPLETE ALL INFORMATION TO I LAST NAME	ENSURE THAT CONTACT I LEGAL FIRST NAME	NFORMATION IS CORRECT AND UP TO DATE: MIDDLE NAME
	-	
Have you ever been a member of USA Swimming under a different la	ast name? If yes, please prov	vide that name:
Previously registered with USA Swimming?   Yes  No		
PREFERRED NAME DATE OF BIRTH (MO/DAY/YR)	-	
(Bill, Beth, Scooter, Liz, Bobby) (Required)		filiated with a club, enter "Unattached"
MAILING ADDR	E85	
СІТҮ	STATE	ZIP CODE
AREA CODE TELEPHONE NO. AREA CODE TELEPHONE I	NO. EXTENSION AREA CO	DDE TELEPHONE NO. AREA CODE TELEPHONE NO.
	FAX	WUDILE
E-MAIL ADDRESS		
IF ANY OF THE ABOVE INFORMATION CHANGES DURING THE YE		
RACE AND ETHNICITY (OPTIONAL): You may check up to two ch		HIP/FINA: itizen: ∏Yes ∏No
S. White T. Hispanic or Latino Are you a member of another FINA federation: Yes No		
U. American Indian & Alaska Native V. Some Other	Race If Yes,	which federation:
W. Native Hawaiian & Other Pacific Islander		
Check if you would like to learn more about the USA Swimming For		
Check if you would like to receive the electronic USA Swimming N	lewsletter	
MEMBERSHIP CODE: Check all that apply		
<ul> <li>Coach-Full Time (Employed full time as a coach)</li> <li>Coach-Part Time (Primary employment is NOT coaching)</li> <li>Certified Official (Starter, Stroke &amp; Turn, Meet Referee, Administrative, etc.)</li> <li>Other (Chaperone, Meet Director, Meet Manager, etc.)</li> </ul>		
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		
<b>COACHES:</b> Also requires current CPR/AED & Safety Training for S <b>EDUCATION REQUIREMENT FOR COACHES</b> at <u>usaswimming.org</u>		
<ul> <li>An individual registering as a coach for the first time must co Drive to pariety in a second for the second upon the second pariety.</li> </ul>		
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 <a href="http://www.usaswimming.org/coachmember">www.usaswimming.org/coachmember</a>		
By becoming a member of USA Swimming, I hereby agree to abi regulations and Code of Conduct of USA Swimming.	de by the rules,	2017 REGISTRATION FEE
		September 1, 2016 through December 31, 2017
Signature Date		USA Swimming Fee + LSC Fee = TOTAL DUE
By signing this application I verify that the above is true and cor	rect.	$\Box Individual $56.00 + $0.00 = $56.00  \Box Life $1,000.00 + $0.00 = $1000.00  \Box Life $1,000.00 + $1000 = $1000.00  \Box Life $1000.00 + $1000 = $1000.00  \Box Life $1000.00 + $1000.00 = $1000.00 \\ \Box Life $
MAKE CHECK PAYABLE TO:		$\Box Life \qquad \$1,000.00 + \$0.00 = \$1000.00$
VIRGINIA SWIMMING, INC.	_	
MAIL APPLICATION & PAYMENT TO:		your computer, filled in, saved, and then printed or fusing a Mac, select 'Print' and then 'Save as PDF'
VIRGINIA SWIMMING, INC.		lication is not complete until payment (by check or
PO Box 1059 Appomattox, VA 24522	credit card) has been r	eceived. Payment can be made by credit card
registrationchair@virginiaswimming.org	through the Payment C	Center at <u>www.virginiaswimming.org</u> .
FOR LSC REGISTRAR USE ONLY: REGISTRATION DATE		
		+ ONLINE ST TEST
CPR FOC 101 FOC 2	U1 F	Rules & Regs Y Principles