

## 2015 NON-ATHLETE REGISTRATION APPLICATION LSC: VIRGINIA SWIMMING

PLEASE PRINT LEGIBLY   CC LAST NAME		E ALL INF	ORMATION TO EN		RE THAT ( EGAL FIRST			NFORMATION	IS CORR		ND UP TO		E:	
							<b>-</b>							
Have you ever been a member o	f USA S	Swimming u	Inder a different last	t nar	me? If yes,	pleas	e provi	ide that name:						
Previously registered with		-			-									
PREFERRED NAME DATE OF BIRTH (MO/DAYIYR) SEX (M-F)														
(Bill, Beth, Scooter, Liz, Bobby)			(Required) MAILING ADDRES	ss			If not aff	filiated with a club,	enter "Unatta	ached"				
	CITY				STAT	E		ZIP C	ODE					
							_							
AREA CODE TELEPHONE NO.		AREA COD		э.	EXTENSION	A	AREA CO	DE TELEPHON	IE NO.	A	AREA CODE	E TEL	EPHONE NO.	
номе	w	ORK				FAX				MOBILE				
I			JL		][]			1[		1		L		
IF ANY OF THE ABOVE II	IFORMA	TION CHANG	SES DURING THE YEA	R – F	PLEASE NOT	TIFY Y	OUR LS	C REGISTRATIO	N/MEMBER	SHIP PER	SON OF	THE CH	ANGES	
RACE AND ETHNICITY: You may check up to two choices CITIZENSHIP/FINA:														
Q. Black or African American R. Asian U.S. Citizen: 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:       Yes       No														
W. Native Hawaiian & Oth		-		1400										
Check if you would like to lear	n more	about the l	JSA Swimming Fou	ında	tion's initiat	tives								
Check if you would like to rec			-											
MEMBERSHIP CODE: Check a														
Coach-Full Time (Emplo								res a Level 2 E res a Level 2 F						
<ul> <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> <li>Requires a Level 2 Background Check &amp; Athlete Protection Training Requires a Level 1 Background Check &amp; Athlete Protection Training</li> </ul>														
<b>Other</b> (Chaperone, Meet			<b>-</b> ,						•			e Prote	ection Training	
If coach, primary age group that glass ALL NON-ATHLETES must have										9+ 🔲 I	Vlasters			
BGC at www.usaswimr	ning.org	g/backgrour	ndcheck APT at w	vww.	usaswimm	ing.or	rg/prote							
COACHES: Also requires curre EDUCATION REQUIREMENT						rtifica	itions							
An individual registering	as a co	ach for the	first time must com	plete	e the online									
• 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														
								AT <u>mm.usus</u>	winning.	.01 <u>9</u> /000				
CHECK IF APPLYING FOR	A FAMI		ERSHIP – ATTACH	IAS	SECOND C	OMP	LETED	NON-ATHLE				HE SE	COND	
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.									2015 RI	EGIST	RATIO	N FE	E	
								September 1, 2014 through December 31, 2015						
Signature		Date							•				TOTAL DUE	
By signing this application I verify that the above is true and correct.								□ Individua  □ Family	I \$52. \$104	+ 00. + 00	\$7.00 \$10.00	) =	\$59.00 \$114.00	
MAKE CHECK PAYABLE TO:													\$1000.00	
VIRGINIA SWIMMING														
MAIL APPLICATION & PAYMENT TO								your comput						
VIRGINIA SWIMMING PO Box 1059								select 'Print' is not comp						
Appomattox, VA 24522					d) has bee					, payin	5 m (8 <b>y</b>	oncor		
registrationchair@virginias	wimmi	ing.org												
FOR LSC REGISTRAR USE ON	LY:	REGISTR	ATION DATE											
BGC AF	יד <u></u> די		_ STSC			LG+ ONLINE ST TEST								