



REG. DATE / OFFICE USE ONLY

REGISTRATION DATE grid

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

Registration form fields: LAST NAME, LEGAL FIRST NAME, MIDDLE NAME

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:

Registration form fields: PREFERRED NAME, DATE OF BIRTH (MO/DAY/YR), SEX (M-F), CLUB CODE, CLUB NAME

Registration form fields: MAILING ADDRESS, CITY, STATE, ZIP CODE

Registration form fields: HOME, WORK, FAX, CELL telephone numbers

Registration form fields: HOME, WORK, FAX, CELL telephone numbers (continued)

Registration form fields: E-MAIL ADDRESS

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

- 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

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

Registration form fields for second family member: LAST NAME, LEGAL FIRST NAME, MIDDLE NAME

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:

Registration form fields for second family member: PREFERRED NAME, DATE OF BIRTH (MO/DAY/YR), SEX (M-F), CLUB CODE, CLUB NAME

Registration form fields for second family member: WORK, FAX, CELL telephone numbers

Registration form fields for second family member: E-MAIL ADDRESS

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- 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

MAKE CHECK PAYABLE TO:

NEW ENGLAND SWIMMING

MAIL APPLICATION & PAYMENT TO:

NEW ENGLAND SWIMMING
20 CLEVELAND ROAD
NEEDHAM, MA 02492
E-Mail: office@neswim.com
781/449-0270

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

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.

CHECK IF YOU WOULD BE INTERESTED IN MAKING A DONATION TO THE USA SWIMMING FOUNDATION ANNUAL FUND