

USA Fee Info

- All new members need a copy of birth certificate on file.
- If you receive free and reduced lunch, you are eligible for a discount on your USA fees. All that is required to get the discount is to show proof. This can be shown 2 different ways. One is making a copy of letter of proof and return it as soon as possible or call food services and ask them to email you a copy. If you have any issues with this process, please talk to a coach.
- If you are a returning member all you need is to renew your USA fees by signing the paper and paying your fees. (Regular fees are \$83.00 and reduced fees are \$5.00)

If you have any questions don't hesitate to ask. The Swim Board will have someone at every practice to help you with any questions you might have.

For immediate questions:

Call/Text Amy Upchurch @ 765-524-2418 or

Heather Sipes @ 765-465-3833


USA SWIMMING

2022 ATHLETE REGISTRATION APPLICATION

LSC:INDIANA SWIMMING

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

LAST NAME

LEGAL FIRST NAME

MIDDLE NAME

PREFERRED NAME

DATE OF BIRTH (MM/DD/YY)

SEX (M/F)

AGE

CLUB CODE

NAME OF CLUB YOU REPRESENT

(Bill, Beth, Scooter, Liz, Bobby)

If not affiliated with a club, enter "Unattached"

NOTE: If you are 18 years of age or older, you are required to abide by to the Minor Athlete Abuse Prevention Policy. In addition, in order to be a member in good standing you must complete the Athlete Protection Training. The training can be accessed at www.usaswimming.org/apt

GUARDIAN #1 LAST NAME

GUARDIAN #1 FIRST NAME

GUARDIAN #2 LAST NAME

GUARDIAN #2 FIRST NAME

MAILING ADDRESS

CITY

STATE

ZIP CODE

AREA CODE

TELEPHONE NO.

FAMILY/HOUSEHOLD EMAIL ADDRESS

MEMBERS'S 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

MAIL APPLICATION & PAYMENT

- ☐ 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*)

HIGH SCHOOL STUDENTS – Year of high school graduation: _____

YEAR LAST REGISTERED: _____. IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2020, ENTER THAT

CLUB CODE: _____ LSC CODE: _____ AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB: _____.

SIGN HERE x _____

SIGNATURE OF ATHLETE, PARENT OR GUARDIAN

DATE

2022 REGISTRATION CATEGORIES (please select only 1)

	Membership Type	Valid	USA Swimming Fee	LSC Fee	Total Fee	Restrictions
<input type="checkbox"/>	Premium	9/1/2021 – 12/31/2022	\$66.00	\$17.00	\$83.00	None
<input type="checkbox"/>	Flex	9/1/2021 – 12/31/2022	\$10.00	\$10.00	\$20.00	Athlete 18-U, no more than 2 sanctioned meets per registration year. Only for meets below LSC Championships, Zone, Sectional, and National Levels.
	Upgrade	9/1/2021-12/31/2022	\$56.00	\$7.00	\$63.00	Flex athlete who swims more than 2 meets or a Divisional/State Championship
<input type="checkbox"/>	Season 1	4/4/2022 – 8/31/2022	\$30.00	\$5.50	\$35.50	Only for meets below Zone, Sectional, and National Levels.
<input type="checkbox"/>	Outreach	9/1/2021 – 12/31/2022	\$5.00	\$0.00	\$5.00	Must meet eligibility criteria. See Outreach Application