

2020 FLEX ATHLETE REGISTRATION APPLICATION LSC: OREGON SWIMMING, INC

There is a two sanctioned meet limit on this membership

THIS MEMBERSHIP IS ONLY FOR MEETS THAT ARE BELOW THE LSC CHAMPIONSHIP, ZONE, SECTIONAL AND NATIONAL LEVELS.

PLEASE PRINT LEGIBLY ● COMPLETE ALL INFOR LAST NAME					MATION: LEGAL FIRST NAME								MIDDLE NAME		
PREFERRED NAME		<u>D/</u>	ATE O	F BIF	RTH (I	MO/DAY/Y	R)	SEX (M/F)	AGE	CLUB CO	ODE _		NAME OF CLUB YOU REPRESENT		
			Ш_									KW			
(Bill, Beth, Scooter, Liz, Bobby)											If no	ot affiliated	d with a clu	ıb, enter "Unattached"	
NOTE: If you are 18 years of ag member in good standing you	je or old must co	ler, y ompl	you a lete tl	re re he At	quir hlete	ed to a e Prote	abio ecti	de by to on Trair	the Mi ning. T	inor Athleto he training	e Abuse J can be	Prevent accesse	ion Polic ed at <u>ww</u> y	cy. In addition, in order to be a w.usaswimming.org/apt	
GUARDIAN #1 LAST NAME			GUA	RDIA	N #1	FIRST	NA	ME	l [GUARD	IAN #2 L <i>A</i>	AST NAMI	<u> </u>	GUARDIAN #2 FIRST NAME	
			<u>MAII</u>	LING .	ADDI	RESS							\neg		
CITY					STATE ZIP CODE								\neg		
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AREA CODE TELEPHONE NO.					FAMILY/HOUSEHOLD EMAIL ADDRESS							s	MEM	IBER'S EMAIL ADDRESS	
	FEDERA COMPE														
OPTIO DISABILITY: A. Legally Blind or Visually Impaired B. Deaf or Hard of Hearing	RACE A	to two	choice	s):		may	N	NAKE CHE	CK PA	YABLE TO:	Kille	r Wha	les Sw	vim Club or KWSC	
Deal of Hard of Healing C. Physical Disability such as amputation, cerebral palsy, dwarfism, spinal injury, mobility impairment Cognitive Disability such as severe learning disorder, autism	☐ Q. Bl; ☐ R. As ☐ S. WI ☐ T. His ☐ U. An ☐ V. So ☐ W. Na	sian hite spanio merica ome O	c or Lation Indiar Other Rac Hawaiia	no n & Ala	ska Na		Y u 1	our clu nattach 2655 S	b. If y ned: C W Cei	on & PAYMEN you are re Oregon Sv nter St, So R 97005	gisterir vimmin	g		2020 REGISTRATION FEE Sept. 1, 2019 through Dec. 31, 202 USA Swimming Fee \$10.00 LSC Fee (max. \$10) \$10.00 TOTAL DUE \$20.00	
														,2010	
HIGH SCHOOL STUDENTS – Year of high school graduation: YEAR LAST REGISTERED: IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2019, ENTER THAT CLUB CODE: LSC CODE:AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB:										☐ 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					
sign	AND	ITIE	DATE	JF TUL	JN LA	SI COMI	FEII	HON KEP	LJENIII	NG IHAI CLUI	J			ming Newsletter (must be 13 years of age or older	
IERE XSIGNATURE (OF ATHL	ETE	PARI	ENT C	R GI	JARDI/	١N			DATE	<u> </u>	RE	G. DATE/L	SC USE ONLY	
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