

REQUIREMENT CHECKLIST FOR FIRST YEAR CLUB MEMBERSHIP

This checklist is designed to verify that all requirements for new club membership have been met. *It must be signed by the Head Coach for the club.* Complete the *CLUB* column below and forward this list with required application materials to the LSC Registration Chair. The LSC Registration Chair will complete the *LSC* column and forward the application to USA Swimming. Do not send incomplete forms!

Club Name	Club Code
Head Coach Applying for Membership_	LSC

Day Phone_____Email_____

Club's Federal Tax ID Number______Date of Application _____

NEW CLUB REQUIREMENT	CLUB	LSC	NATL HQ
Club Items:			
1. LSC Application Form			
2. Team Mission Statement			
3. First-Year Budget or Business Plan			
4. Safety Action Plan for all facilities			
5. Facility Use Confirmation Form (for all facilities)			
6. Club Leadership and Business Management 101 Online Course. (Completion certificates for Head Coach and one additional club leader)			
7. Club Leadership and Business Management 201 Course.			
(Two club leaders must attend prior to 2 nd year of club registration)			
8. Club Registration Fee			NA
Name and club code of new club does not conflict with any other club in this LSC	LSC Registrar Signature:		
Head Coach Items:			
1. Head Coach's Name:		DOB:	
2. Required Safety Certifications (Coaches Advantage Training, Concussion Protocol Training, Adult & Child CPR/AED, Online and In-Water Safety Training)			
3. Background Check (Safe Sport → Complete a Background Check)			
 4. Athlete Protection Training (Safe Sport → Athlete Protection Training) 			
 5. Coach Ed. Requirement: Foundations of Coaching 101, 201 & Rules & Regs. (For You → Coaches → Foundations of Coaching) 			
6. ASCA Level 2 Stroke School*			
7. ASCA Level 3 Physiology School*			
* A minimum of three years of USA Swimming coaching experience may waive the	ASCA Level 2	2 and/or ASC	CA Level 3 e

* A minimum of three years of USA Swimming coaching experience *may* waive the ASCA Level 2 and/or ASCA Level 3 educational requirement. Please list the LSC and years coached below. Final determination is by the Director of the Sport Development Division of USA Swimming.

Year	LSC	Year	LSC	Year	LSC
		-	-	-	-

By signing below, I certify that the information given on this form is truthful, accurate, and complete. Head Coach Signature:_____Date:_____

Print Name:

Official Use	Only: Initial & Date when complete
LSC Official	Date

NHQ Official	Date
NITU UIIUai	Dale