



Email: office@si-swimming.com
Ph #: 760-525-3748

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

Form fields for personal information: LAST NAME, LEGAL FIRST NAME, MIDDLE NAME, PREFERRED NAME, DATE OF BIRTH (MO/DAY/YR), SEX (M/F), AGE, CLUB CODE, NAME OF CLUB YOU REPRESENT. Includes example text: (Bill, Beth, Scooter, Liz, Bobby) and instruction: 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

Form fields for guardian information: 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, MEMBER'S EMAIL ADDRESS

Enter athlete's email if 17 yr or older

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

2021 REGISTRATION FEE
June 1, 2020 through December 31, 2021
USA Swimming Fee + LSC Fee = TOTAL DUE
\$64.00 + \$10.00 = \$74.00

MAKE CHECK PAYABLE TO:
SAN DIEGO IMPERIAL SWIMMING

MAIL APPLICATION & PAYMENT TO:
SAN DIEGO IMPERIAL SWIMMING
PO BOX 1347
FALLBROOK CA 92088

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: _____

- 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)

SIGN
HERE x _____ SIGNATURE OF ATHLETE, PARENT OR GUARDIAN _____ DATE _____

REG. DATE/LSC USE ONLY _____