

2016 NON-ATHLETE REGISTRATION APPLICATION LSC: ILLINOIS SWIMMING

PLEASE PRINT LEGIBLY COMPLETE ALL INFORM LAST NAME		MATION TO ENSURE THAT CONTACT INFORM LEGAL FIRST NAME				MATION IS CORR	ATION IS CORRECT AND UP TO DATE: MIDDLE NAME		
					_				
Have you ever been a member of USA Sw	imming under a diffe	rent last na	me? If ves	pleas	e provide tha	L			
Previously registered with USA Swi	-		-						
PREFERRED NAME	DATE OF BIRTH (MO/D		<u>SEX (M-F)</u>				CLUB NAME		
(Bill, Beth, Scooter, Liz, Bobby)	(Required)				If not affiliated w	ith a club, enter "Unatta	ched"		
MAILING ADDRESS									
CITY STATE ZIP CODE									
						_			
AREA CODE TELEPHONE NO.	AREA CODE TELEPH	HONE NO.	EXTENSION	A		LEPHONE NO.	AREA CO	DDE TELEPHONE NO.	
номе				FAX			MOBILE		
E-MAIL AD									
	511200								
IF ANY OF THE ABOVE INFORMATIO	ON CHANGES DURING	THE YEAR -	PLEASE NO	TIFY Y	OUR LSC REGI	STRATION/MEMBER	SHIP PERSON (OF THE CHANGES	
RACE AND ETHNICITY: You may check up to two choices CITIZENSHIP/FINA:									
Q. Black or African American R. Asian U.S. Citizen: Yes No									
S. White T. Hispanic or Latino Are you a member of another FINA federation: Yes No									
U. American Indian & Alaska Native V. Some Other Race If Yes, which federation:									
Check if you would like to learn more at	out the LISA Swimm	aina Founda	tion's initia	tivos					
Check if you would like to receive the el		0		uves					
MEMBERSHIP CODE: Check all that app	ly	-							
Coach-Full Time (Employed full time as a coach) Requires a Background Check & Athlete Protection Training									
Coach-Part Time (Primary employment is NOT coaching) Certified Official (Starter, Stroke & Turn, Meet Referee, Administrative, etc.) Requires a Background Check & Athlete Protection Training Requires a Background Check & Athlete Protection Training									
Other (Chaperone, Meet Director,			. ,			ackground Check			
If coach, primary age group that you coach							+ 🗌 Maste	rs	
ALL NON-ATHLETES must have a curre BGC at www.usaswimming.org/b						Fraining			
BGC at www.usaswimming.org/backgroundcheck APT at www.usaswimming.org/protect COACHES: Also requires current CPR/AED & Safety Training for Swim Coaches certifications									
 EDUCATION REQUIREMENT FOR COA An individual registering as a coad 				e Four	ndations of Co	paching 101 test p	rior to becomi	ng a Coach Member.	
 An individual registering as a coach for the first time must complete the online Foundations of Coaching 101 test <u>prior</u> to becoming a Coach Member. Prior to registering as a coach for the second year, the online tests for Foundations of Coaching 201 and Rules and Regulations must be completed. 									
ACCEPTABLE SAFETY REQUIREMENT	COURSES AND O	NLINE TES	TS ARE A	VAIL	ABLE AT <u>ww</u>	w.usaswimming.	org/coachme	ember	
By becoming a member of USA Swimm		to abide by	the rules,						
regulations and Code of Conduct of USA Swimming.						2016 REGISTRATION FEE			
						September 1, 2015 through December 31, 2016 USA Swimming Fee + LSC Fee = TOTAL DUE			
Signature Date By signing this application I verify that the above is true and correct.					🗆 Ind	□ Individual \$54.00 + \$12.00 = \$66.00 □ Life \$1,000.00 + = \$1000.00			
					Lif				
ILLINOIS SWIMMING, INC									
MAIL APPLICATION & PAYMENT TO:									
Illinois Swimming, Inc									
1400 E Touhy Ave									
Suite 410 Des Plaines, IL 60018									
FOR LSC REGISTRAR USE ONLY:				-					
	STS(
CPR FOC 101	F	-00 201			- Rules &	Regs	Y Prin	ciples	