

USA Swimming- MIDDLE ATLANTIC

2009 - 2010 ATHLETE REGISTRATION APPLICATION

PLEASE PRINT * COMPLETE ALL INFORMATION

LAST NAME LEGAL FIRST NAME MIDDLE NAME DATE OF BIRTH SEX (M/F) AGE

PREFERRED NAME

MAILING ADDRESS AREA CODE TELEPHONE NUMBER

CITY STATE ZIP CODE

CLUB CODE NAME OF CLUB YOU REPRESENT

U.S. CITIZEN? DUAL CITIZEN?
YES NO YES NO

OTHER SWIMMING AFFILIATIONS

(circle all that apply):

- O. Junior High School
- 1. Senior High School
- 2. YMCA / YWCA
- 3. College
- 4. Summer Swim League
- 5. Masters
- 6. Disabled Sports Org.
- 7. Water Polo
- 8. None

DISABILITY:

- A. 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 mental retardation, severe learning disorder, autism

ETHNICITY (In accordance with US Census Bureau guidelines, you may make up to 2 choices if appropriate):

- Q. African American
- R. Asian or Pacific Islander
- S. Caucasian
- T. Hispanic
- U. Native American
- V. Other
- W. Decline

IF DUAL CITIZEN OR NON-CITIZEN, ARE YOU A MEMBER OF ANOTHER FINA FEDERATION?
YES NO

MAKE CHECK PAYABLE TO: Hatboro Area YMCA
(This fee will be invoiced through the YMCA)

SUBMIT APPLICATION TO PAT RYAN

If joining to participate in a learn to swim program, please check here.

YEAR LAST REGISTERED _____

If you registered with a different USA Swimming Club in 2009, enter that CLUB CODE _____ LCS CODE _____ date of last competition for that club ___/___/___

REGISTRATION FEE: \$57.00

SIGN HERE **X** _____
SIGNATURE OF ATHLETE, PARENT OR GUARDIAN