

## **USA SWIMMING**

SWIMMING

## 2022 FLEX ATHLETE REGISTRATION APPLICATION LSC: OREGON SWIMMING

Athlete must be 18-Under
There is a two (2) sanctioned meet limit

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

PLEASE PRINT LEGIBLY ● COMPLETE ALL INFORM  LAST NAME		MATION: LEGAL FIRST NAME		MIDDLE NAME
PREFERRED NAME	DATE OF BIR	TH (MM/DD/YY) SEX (M/F)	AGE CLUB CODE	NAME OF CLUB YOU REPRESENT
(Bill, Beth, Scooter, Liz, Bobby)				If not affiliated with a club, enter "Unattached"
NOTE: If you are 18 years of a in good standing you must co	ge or older, you are red mplete the Athlete Prof	quired to abide by the tection Training. The	e Minor Athlete Abuse l training can be access	Prevention Policy. In addition, in order to be a mem sed at <a href="https://www.usaswimming.org/apt">www.usaswimming.org/apt</a>
GUARDIAN #1 LAST NAM	E GUARDIA!	N #1 FIRST NAME	GUARDIAN #2	2 LAST NAME GUARDIAN #2 FIRST NAME
	MAILING A	ADDRESS		
CI	ΤΥ	STATE	ZIP CODE	
<u>.</u>				
AREA CODE	TELEPHONE NO.	FAMILY/HC	DUSEHOLD EMAIL ADDRE	ESS MEMBER'S EMAIL ADDRESS
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	HAVE YOU REPRESENT FEDERATION AT INTER COMPETITION? YES	TED THAT NATIONAL S	Se	2022 REGISTRATION FEE epetember 1, 2021 through December 31, 2022
severe learning disorder, autism		er Pacific	USA Swimming F	
			\$10.00	+ \$10.00 = \$20.00
PAYMENT: PAYMENT SHOULD BE MADE TO YOUR (		PPLICATION TO: OREGONSWIMMING.ORG	_	
OR IF REGISTERING AS UNATTACHED CALL 503-747-3702 TO PAY BY PHONE	J	OX 449, WEST LINN, OR 9706	8	
HIGH SCHOOL STUDENTS – Year of high YEAR LAST REGISTERED: If CLUB CODE: LSC CODE:	YOU REGISTERED WITH A DIF		,	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 ×SIGNATURE	OF ATHLETE, PARENT O	R GUARDIAN		REG. DATE/LSC USE ONLY