



USA SWIMMING

**2006 NON-ATHLETE REGISTRATION APPLICATION
LSC: POTOMAC VALLEY SWIMMING**

REGISTRATION DATE
OFFICE USE ONLY

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

LAST NAME _____ LEGAL FIRST NAME _____ MIDDLE NAME _____

Have you ever been a member of USA Swimming under a different last name? If yes, please provide that name: _____

Registered last year? Yes No If registered in a different LSC, which LSC: _____

PREFERRED NAME _____ BIRTHDAY: M/D/Y _____ SEX M-F _____ CLUB CODE _____ CLUB NAME _____

(Required)

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME [AREA CODE] TELEPHONE NO. WORK [AREA CODE] TELEPHONE NO. EXTENSION FAX [AREA CODE] TELEPHONE NO. CELL [AREA CODE] TELEPHONE NO.

E-MAIL ADDRESS _____

CIRCLE ALL THAT APPLY:

1. **A. Coach-Full Time** (primary income is from coaching) **B. Coach-Part Time** (primary income is NOT from coaching) **C. Official** **D. Other**

LSC REGISTRATION USE ONLY -- ENTER EXPIRATION DATE OF EACH COURSE

COACHES SAFETY CURRICULUM: _____ FIRST AID _____ SAFETY TRAINING _____ COMPLETED Yes No

CPR _____ EDUCATION REQ.: Grandfathered

2. If coach, primary age group that you coach (may be more than one): F. 10-Un G. 11-12 H. 13-14 I. 15-18 J. 19+ K. Masters

3. Ethnicity: Q. African American R. Asian or Pacific Islander S. Caucasian T. Hispanic U. Native American V. Other W. Decline
(In accordance with U.S. Census Bureau guidelines, you may make up to two choices if appropriate.)

IF FAMILY MEMBERSHIP, PLEASE COMPLETE THESE LINES FOR THE SECOND NON-ATHLETE FAMILY MEMBER:

LAST NAME _____ LEGAL FIRST NAME _____ MIDDLE NAME _____

Have you ever been a member of USA Swimming under a different last name? If yes, please provide that name: _____

Registered last year? Yes No If registered in a different LSC, which LSC: _____

PREFERRED NAME _____ BIRTHDAY: M/D/Y _____ SEX M-F _____ CLUB CODE _____ CLUB NAME _____

(Required)

WORK [AREA CODE] TELEPHONE NO. EXTENSION FAX [AREA CODE] TELEPHONE NO. CELL [AREA CODE] TELEPHONE NO.

E-MAIL ADDRESS _____

CIRCLE ALL THAT APPLY:

1. **A. Coach-Full Time** (primary income is from coaching) **B. Coach-Part Time** (primary income is NOT from coaching) **C. Official** **D. Other**

LSC REGISTRATION USE ONLY -- ENTER EXPIRATION DATE OF EACH COURSE

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3. Ethnicity: Q. African American R. Asian or Pacific Islander S. Caucasian T. Hispanic U. Native American V. Other W. Decline
(In accordance with U.S. Census Bureau guidelines, you may make up to two choices if appropriate.)

MAKE CHECK PAYABLE TO:

POTOMAC VALLEY SWIMMING

MAIL APPLICATION & PAYMENT TO:

POTOMAC VALLEY SWIMMING
P.O. BOX 3729
MCLEAN, VA 22103-3729
E-Mail: register@pvswwim.org
202/549-5750

Check No: _____

Check Date: _____

	REGISTRATION FEE		TOTAL DUE
	USA Swimming Fee	LSC Fee	
<input type="checkbox"/> Individual	42.00	+ 0.00	= \$42.00
<input type="checkbox"/> Family	80.00	+ 0.00	= \$80.00
<input type="checkbox"/> Sports Med.	50.00	+ 0.00	= \$50.00
<input type="checkbox"/> Sustaining	100.00	+ 0.00	= \$100.00
<input type="checkbox"/> Life	750.00	+ 0.00	= \$750.00

USA Swimming occasionally makes its membership list available to its marketing partners. Please notify USA Swimming's Member Services Dept. at 719/866-4578 if you do not wish to receive these mailings.

ANNUAL MEMBERSHIP DUES OF \$42.00 OR MORE INCLUDE \$2 FOR A 1-YEAR SUBSCRIPTION TO SPLASH.