



YEAR 2010 SWIMMER TRANSFER APPLICATION
NEW TEAM IS RESPONSIBLE TO GENERATE TRANSFER APPLICATION FOR SWIMMER—THIS FORM MUST BE FILLED OUT COMPLETELY AND CORRECTLY FOR THE TRANSFER OF THE SWIMMER TO TAKE EFFECT

DATE: _____ PHONE NUMBER: _____

SWIMMER'S FULL NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

BIRTHDATE: _____ SEX: _____ USA SWIM #: _____

E-MAIL: _____

OLD USA SWIM CLUB NAME: _____

CLUB CODE: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

LAST DAY OF USA SWIMMING COMPETITION WHERE SWIMMER WAS ATTACHED TO OLD USA SWIM TEAM CLUB

NAME OF MEET: _____

DATE(S) OF MEET: _____

NEW USA SWIM CLUB NAME: _____

CLUB CODE: _____ CLUB CONTACT: _____

CLUB CONTACT PHONE #: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

I UNDERSTAND THAT IN ORDER FOR ME TO ATTACH AND/OR REPRESENT MY NEW USA SWIM TEAM/CLUB IN A MEET OR COMPETITION, 120 DAYS MUST HAVE ELAPSED WITHOUT ME HAVING BEEN ATTACHED AND/OR REPRESENTED ANY OTHER USA SWIM TEAM/CLUB. I ALSO CERTIFY THAT I HAVE NO OUTSTANDING FEES OR DEBTS WITH MY FORMER USA SWIM TEAM/CLUB. THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: _____ CONTACT #: _____

MAIL APPLICATION FORM TO UTAH SWIMMING REGISTRATION COORDINATOR

UTAH SWIMMING REGISTRATIONS
P.O. BOX 71837
SALT LAKE CITY, UTAH 84171