

USASF ATHLETE MEMBERSHIP INFORMATION

RENEWAL _____

NEW MEMBER _____

(If you registered and submitted your birth certificate thru another gym, please check renewal)

ATHLETE:

FIRST NAME: _____

MIDDLE NAME: _____

LAST NAME: _____

BIRTH DATE: _____

ADDRESS: _____

PARENT:

FIRST NAME: _____

LAST NAME: _____

EMAIL ADDRESS _____ @ _____

ADDRESS (IF DIFFERENT FROM ABOVE):

New Members must also attach a birth certificate