

MINNESOTA SWIMMING, INC. ATHLETE TRANSFER APPLICATION

Rev. 9-1-05

If the MSI office does not receive a complete/signed transfer form and fee, the transfer will not be processed and no new club affiliation will be reflected for the athlete.

PARENT, GUARDIAN, OR ADULT ATHLETE MUST READ, COMPLETE & SIGN THIS APPLICATION

Date: _____ Athlete's 14 digit USA-S Registration ID# _____

Athlete's Legal Name: _____
Last Name First Name Middle Initial Preferred Name

Athlete's Birth Date: _____ / _____ / _____ Gender: (Circle) M F
Month Day Year

Athlete's Current Address: _____
NEW? Yes / No Address & Street City State Zip Code

Home Phone Number: _____ - _____
NEW? Yes/ No Area Code

OLD INFORMATION

Former Club You Represented: _____ Club Code: _____ LSC: _____

Date of last competition with above Club: _____
Name / Type of Meet Month/ Day/ Year

I understand that I must wait 120 days from my last competition representing my old club before I can represent my new club in competition. I will swim UNATTACHED at all meets in which I participate during these 120 days. I will not swim on any club relays until my 120 days have elapsed. I also certify that I have no outstanding fees or debts with my old club and the above information is correct to the best of my knowledge.

SIGNATURE: _____
Signature of Parent, Guardian, or Athlete, over 18 years old

NEW INFORMATION

Name of New Club: _____ New Club Code: _____

Transfer is effective upon receipt by the MSI Swim Office of the completed transfer form and fee. Athlete will be unattached until the 120 days is determined and transfer is resolved. Based on the attachment date, the athlete will be issued either an unattached card or an attached card reflecting the new club.

Return this completed/signed form, along with a processing fee of \$5.00, to:
Minnesota Swimming
1001 Highway #7, Hopkins, MN 55305

The following will be exempt from paying the transfer fee:

- College athletes returning to summer teams or their college teams
- Originally registered Unattached athletes, now attaching to a currently chartered club

OFFICE USE ONLY: Date Received _____ Fee pd. Check # _____ by _____

Original Registration Date _____ Attachment Date: _____

MN-Unattached card issued _____ Transfer Complete (MN-Attached card issued) _____