

Niagara Swimming 2014 Athlete Transfer Application

ATHLETE INFORMATION

Date:	Athlete's USA Swimming Registration ID:						
Athlete's Legal Name:							
7ttmote e Logar Hamor	Last Name	First Name	Middle Initial		Preferred Name		
Athlete's Birth date:							
	Month	Day	Year				
Athlete's Current Address:							
	Address and St	reet	City	State	Zip Code		
Home Phone Number:							
	(Area Code)						
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 in any meets I participate in during these 120							
days. I will not swim on any club relays until my 120 days have elapsed.							
•			•				
Signature of Parent or Guardian (Athlete, if over 18 years of age)			Date				
PRIOR CLUB INFORMATION							
Name of Club releasing from:			Club Code: LSC:				
Date of last sanctioned competition with above Club: _			Name of Meet Month		Month/ Day/ Year		
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NEW CLUB INFORMA	TION						
Name of New Club:			New Club Code:				
Name of Head Coach of	above club:						
DETIID!	10 00MS; ETES	FORM AND 1			*F 00 TO		
	IS COMPLETED				•		
(Fee not	required when s	submitted as pa	irt of a membe	rsnıp ren	iewai)		

James L. Bowen, Jr. 586 Van Kirk Road Newfield, NY 14867

OFFICE USE ONLY					
DATE RECEIVED:	FEE PAID:	CURRENT YEAR REGISTRATION DATE:			
ATTACH DATE:	UNATTACHED STATUS BEGUN ON:				
TRANSFER COMPLETE (ATTACHED CARD ISSUED):					

