

LOUISIANA SWIMMING
9602 NOB LANE
SHREVEPORT, LA. 71106

UNITED STATES SWIMMING – CHANGE OF INFORMATION / TRANSFER FORM

LAST NAME _____ FIRST NAME _____ INITIAL _____
SEX _____

USS NUMBER _____

DATE OF LAST ATTACHED SANCTIONED

MEET _____

Swimmer will be eligible to compete for the New Club 121 days from the last day of this meet.

OLD CLUB NAME _____ CLUB CODE _____

SWIMMER'S OLD ADDRESS _____

CITY _____

STATE _____ ZIP _____

NEW CLUB NAME _____ CLUB CODE _____

SWIMMER'S NEWADDRESS _____

CITY _____

STATE _____ ZIP _____

SWIMMERS SIGNATURE _____

PARENT / COACH (if minor) _____

This form must be filled out in full. (no blanks)

Return form to:

Enclose \$2.00 fee

Jack L. Jordan
9602 Nob Lane
Shreveport, LA 71106