

TRANSFER REQUEST FORM METROPOLITAN SWIMMING (MR)

CURRENT REGISTRATION I	NFORMATION:		
Last Name	First Name	Middle Name	
Address			
City		State	Zip
Home Phone			
USA Swimming ID Number:			
Date of Birth // MO/DAY/YR	Sex Age	Preferred Name	Billy, Bob, Beth, Liz
Previous Club: LSC Code:	Club Code:	Club Name:	
Last date of competition represe	enting this club:		
Name of meet	(City	State
New Club: LSC Code:	Club Code:	Club Name:	
This will confirm that the above Unattached for 120 consecutive with USA Swimming Rules and	days from the date of l		
Signature of Athlete, Par	ent or Guardian		Date

Metropolitan Swimming LSC Transfer Fee:

The old club will be notified via email from USA Swimming when a transfer has occurred. The old club has the responsibility to notify the LSC Registrar within sixty (60) days if the club has obtained a court judgment in accordance with USA Swimming Rules and Regulation 203.6. If there is a court judgment, the swimmer will be Unattached until such time as the judgment has been satisfied.

Mail this completed Form, with Club Check or Money Order for \$5.00 (NO Personal Checks!) to:
Metropolitan Swimming, Inc.
99 Sheep Pasture Rd
Port Jefferson, NY 11777