

USASF MEMBERSHIP APPLICATION

GYM NAME: Dakota Spirit

**ATHLETE FULL NAME** (as printed on your birth certificate)

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

GENDER  Male  Female E-MAIL (Athlete) \_\_\_\_\_

BIRTH DATE \_\_\_\_\_ (**YOU MUST ATTACH A COPY OF ATHLETE BIRTH CERTIFICATE**)

I authorize the gym/program listed above to upload the birth certificate for this athlete - Parent Initials \_\_\_\_\_

To process your request for athlete membership, your all star gym/program will create a user profile for this **ATHLETE**. Both the **ATHLETE** and the **PARENT/LEGAL GUARDIAN** will have access to this account using unique user names and passwords. Athletes under the age of 13 will have “readonly” access. Athletes 13 and older will have access to the account with permissions to update records (such as contact information).

PLEASE LIST THE INFORMATION BELOW TO CREATE THE **ATHLETE** ACCOUNT:

USER NAME \_\_\_\_\_ (Must be UNIQUE, do not use same for parent user name)

TEMPORARY PASSWORD \_\_\_\_\_ (User should change this when they log in the first time)

PARENT INFORMATION Provide information on the PARENT/LEGAL GUARDIAN of the athlete.

Name \_\_\_\_\_ E-MAIL (Parent) \_\_\_\_\_

PLEASE LIST THE INFORMATION BELOW TO CREATE THE **PARENT/LEGAL GUARDIAN** account – with access to the account with permissions to update records (such as contact information).

USER NAME (The account will be created using the PARENT E-MAIL address listed above)

TEMPORARY PASSWORD \_\_\_\_\_ (User should change this when they log in the first time)

Please READ the attached **ATHLETE MEMBERSHIP TERMS BEFORE SIGNING** 1. I fully understand and accept each of the conditions listed in the attached Athlete Membership Terms, allowing my participation in any USASF Member Event Producer event.

2. The birth date listed above is correct and can be verified by providing a birth certificate.

3. I fully understand that failure to provide a birth certificate upon request or providing a birth certificate that has been altered or falsified may result in disciplinary action including but not limited to restriction of membership and ineligibility.

Athlete Signature \_\_\_\_\_ Date \_\_\_\_\_ All athletes age 12 & older must sign this form

\*Required for any athlete who is not yet 18 years old: As parent or legal guardian of this athlete, I hereby verify by my signature below, that :

1. I fully understand and accept each of the conditions listed in the attached Athlete Membership Terms, allowing my participation in any USASF Member Event Producer event.

2. The birth date listed above is correct and can be verified by providing a birth certificate.

3. I fully understand that failure to provide a birth certificate upon request or providing a birth certificate that has been altered or falsified may result in disciplinary action including but not limited to restriction of membership and ineligibility.

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_