



Club Membership Profile

(USE BLACK OR BLUE INK & PRINT LEGIBLY)

Club Name: _____

Club Address: _____

City/State/Zip: _____

Contact Name: _____ Position: _____

Home Phone: _____ Work Phone: _____ Fax: _____

E-mail: _____ Would you like to receive free coach email updates? Yes No

Club website address: _____

Complete mailing address for toolbox (if different than club address above. No PO Boxes):

LSC: _____ Club Code: _____

Zone: Eastern Central Southern Western Club setting: Rural Urban Suburban

What year was your team chartered? _____ # of coaches on team: Full Time ___ Part Time ___

Nearest major city (within 50-100 miles): _____

Head Coach Information:

Name: _____ Number of years of experience _____

Average # of swimmers in your training group: _____ Do you coach: Full time Part time

Home Phone: _____ Work Phone: _____ Fax: _____

E-mail: _____

Would you like to receive free USA Swimming coach email updates (1-4 times per month)? Yes No

Assistant Head Coach or Head Age Group Coach Information:

Name: _____ Number of years of experience _____

Average # of swimmers in your training group: _____ Do you coach: Full time Part time

Home Phone: _____ Work Phone: _____ Fax: _____

E-mail: _____

Would you like to receive free USA Swimming coach email updates (1-4 times per month)? Yes No

To receive the free Club Toolbox, this form must be completed and have both signatures, if applicable. The Club Toolbox is property of the above mentioned swim team or club. It is neither the property of the coach nor the board/booster president. Please allow 4-6 weeks for delivery.

**Return completed forms to:
Toolbox offer, USA Swimming, One Olympic Plaza, Colorado Springs, CO, 80909**

Athlete Information

Total number of year round registered athletes: _____

Approximate number of athletes:

	Male		Female
Winter	_____ 12&u _____ 13&o	_____ 12&u _____ 13&o	
Summer	_____ 12&u _____ 13&o	_____ 12&u _____ 13&o	

If you offer seasonal membership, please list the season dates:

Approximate number of athletes:

	Male		Female
Season One	_____ 12&u _____ 13&o	_____ 12&u _____ 13&o	
Season Two	_____ 12&u _____ 13&o	_____ 12&u _____ 13&o	

Last year how many athletes: _____ Quit _____ Joined

Which Learn to Swim Program does your club offer?

_____ Red Cross _____ Swim America _____ Your Own _____ Other
 _____ No program offered

Approx. numbers of swimmers in learn to swim program: _____

In order to help our Outreach Program, please tell us how many of your athletes fall into the following categories:

_____ African-American	_____ Native American
_____ Asian/Pacific	_____ Other
_____ Caucasian	_____ Don't know
_____ Hispanic	_____ Decline to answer
_____ Mixed	

Annual Training Fees: _____ Seniors
 _____ Entry Level Age Group
 _____ Advanced Age Group

Please check the types of scholarships your club offers:

_____ None offered _____ Disabled _____ At Risk Youth
 _____ Financial _____ Academic _____ Talent
 _____ Other, explain: _____

Survey

Which programs or services is your club interested in receiving information about?

_____ Swim-A-Thon
 _____ Gold Medal Clinics
 _____ Athlete Camps
 _____ Strategic Planning Seminar
 _____ Coaches' Conferences
 _____ Coach Education
 _____ Parent Education
 _____ Club Leadership and Business Management School
 _____ Recruiting information, posters, postcards, videos
 _____ Other: _____

What is the highest level of competition achieved by your club's swimmers? Please check only one.

_____ Olympics
 _____ National Team
 _____ Olympic Trials
 _____ National Championships
 _____ Junior Championships
 _____ Sectional/Regional Championships
 _____ Zone Championships
 _____ LSC Championships

Team Operation

Who owns the club:

_____ Coach _____ School System _____ Parent board _____ College
 _____ YMCA/YWCA _____ Park & Rec. _____ Private _____ Other

If board run, how many are on board? _____

For Tax Purposes, is your club a:

_____ NFPO _____ 501-c3 _____ 501-c6
 _____ For Profit _____ Sole Proprietor _____ S12 _____ Other

Do you have any non-coach people who fulfill the following job duties in your club?

_____ Office Manager _____ Accountant
 _____ Business Manager _____ Secretary _____ Other

Total approx. pool rental paid annually for all facilities:
 \$ _____

What is your annual operating budget? (circle one)

\$0 – \$25,000 \$25,000 – \$100,000
 \$100,000 – \$250,000 \$250,000 +

WINTER SEASON INFORMATION

Number of pools and **total** hours per **week**:

_____ 25 yard _____ 25 meter _____ 50 meter _____ other

_____ hours _____ hours _____ hours _____ hours

Who owns the pool(s) you use?

_____ Coach _____ School System _____ Parent board _____ College
 _____ YMCA/YWCA _____ Park & Rec. _____ Private _____ Other

SUMMER SEASON INFORMATION

Number of pools and **total** hours per **week**:

_____ 25 yard _____ 25 meter _____ 50 meter _____ other

_____ hours _____ hours _____ hours _____ hours

Who owns the pool(s) you use?

_____ Coach _____ School System _____ Parent board _____ College
 _____ YMCA/YWCA _____ Park & Rec. _____ Private _____ Other

REQUIRED TO RECEIVE FREE TOOLBOX

<p>_____</p> <p>Signature of the Head Coach</p> <p>_____</p> <p>Signature of the Board/Booster President (if applicable)</p> <p>If you only have one signature above, please explain why: _____</p> <p>_____</p> <p>_____</p>
