



Arizona Swimming, Inc.

Contact Information Change Form

Please update my USA/Arizona Swimming record to reflect the following changes:

Name as shown on USA Card	<input type="text"/>		
Membership Type:	Athlete: <input type="checkbox"/>	Coach: <input type="checkbox"/>	Other: <input type="checkbox"/>
Name Change:	FROM:	<input type="text"/>	
	TO:	<input type="text"/>	
Address Change:	FROM:	<input type="text"/>	
	TO:	<input type="text"/>	
E-mail Change	FROM:	<input type="text"/>	
	TO:	<input type="text"/>	
Phone Change:	FROM:	<input type="text"/>	
	TO:	<input type="text"/>	
	Change for:	Home Cell <input type="checkbox"/>	Work Phone Fax <input type="checkbox"/>
Signature (parent must sign for minors)	<input type="text"/>		<input type="text"/>
	Signature		Date

Change Form may be mailed to the AzSI at 1212 E. Osborn Rd., Suite 101 Phoenix AZ 85014 or submit via fax at +1 602 266 9223 or scanned and emailed to office@azswimming.org.

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