



## CENTRAL ZONE DIVERSITY SELECT CAMP

June 10 – 13, 2010  
IUPUI – Indianapolis, Indiana  
Athlete Application

APPLICATION DEADLINE: **Saturday, May 8, 2010**

RETURN APPLICATION TO: Matt Wunderlin  
903 N. Madison St.  
Waunakee, WI 53597  
wunderlins@tds.net

Athlete's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_

Athlete's Email Address: \_\_\_\_\_

USA Swimming Number: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Male       Female

Club Name: \_\_\_\_\_

Parent Names: (Father) \_\_\_\_\_

(Mother) \_\_\_\_\_

Parent contact Email Address:

\_\_\_\_\_

### Central Zone Diversity Select Camp Eligibility:

Any swimmer who represents an ethnically under-represented population that is less than 20% of the current USA Swimming membership. You may check more than one:

African American     Native American     Hispanic     Asian or Pacific Islander

Other \_\_\_\_\_

Signatures below testify to the eligibility of the athlete:

Parent/Guardian Signature: \_\_\_\_\_

Coach of record Signature: \_\_\_\_\_

**MUST READ AND CHECK ALL OR APPLICATION WILL NOT BE CONSIDERED**

- \_\_\_ I will be physically ready for training
- \_\_\_ I understand that I must meet the ethnicity eligibility (above) to apply for this camp.
- \_\_\_ I understand that I must meet the selection eligibility requirements and the qualifying time standards to apply for this camp.
- \_\_\_ I understand the additional camp details will be provided to me upon my acceptance.
- \_\_\_ I understand that additional paperwork that I receive **MUST** be returned to the Central Zone Diversity Select Camp Oversight Committee on or before their published deadlines.
- \_\_\_ I have listed at least three events on my application that I have achieved the time standard for this camp.
- \_\_\_ I understand funding for this camp will come from my local LSC for transportation, room and meals provided for me at the camp.
- \_\_\_ I am returning this application to my local LSC Board appointee for submission by their published deadline.

**1. In order to apply, you should have qualified for your LSC Championship meet.**

List up to three events you qualified for in your LSC championships	List your best time in each event	List the date when you achieved this time	List the meet where you achieved this time

**If you did not qualify for your LSC Championships but still wish to apply for the camp, list your best events and best times.**

2. I

List your best three events	List your best time in each event	List the date when you achieved this time	List the meet where you achieved this time

**List your IMX Score for the current season:** \_\_\_\_\_

(Find the IMX Score on your own *MY USA Swimming* page at [www.usaswimming.org](http://www.usaswimming.org).)

Find more information about IMX in the *Times/Time Standards* section on the USA Swimming website.)

\_\_\_\_\_  
(ATHLETE'S SIGNATURE)

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
(COACH'S SIGNATURE)

\_\_\_\_\_  
(DATE)