USATF Membership Application

☐ New Member ☐ Renewal (from previous year – USATF Number _____)

Please print or type information

Last Name	First Name	Initial

Address

City | State | Zip Code

Sex M/F ☐ Age Today ☐☐ Date of Birth ☐☐-☐☐-☐☐☐☐ (MM-DD-YYYY – i.e.: 02-19-1958)

USA Citizen ☐ Yes ☐ No If no, country of Citizenship

Phone Number ☐☐☐-☐☐☐-☐☐☐☐ 10-POTOMA VALLY ASSOCIATION

Club No. 0177 Club Name RANDALLSTOWN TRACK CLUB

Email

(Your membership # will be emailed to you. Your email address will not be shared with anyone.)

Please check all appropriate sports codes here:

☒ Track ☒ Field ☐ Road Running/LDR ☒ Cross Country ☐ Ultra-Marathon ☐ Mountain/Trail ☒ Race Walking

Membership Category Codes

AT ☐☐ ☐☐ ☐☐ ☐☐ ☐☐

Please use the codes below – you may indicate one or more categories.

AT: Athlete
DA: Disabled Athlete
CH: Coach-uncertified
CD: Developmental certified
C1: Coach - Level 1 certified
C2: Coach - Level 2 certified
C3: Coach - Level 3 certified
PA: Parent
OF: Official -uncertified
OA: Official – Association
ON: Official - National
OM: Official - Master
AD: Administrator

By signature below, I, a prospective member of USA Track & Field, agree to abide by the applicable USATF Bylaws, Operating Regulations, and Competition Rules for my level(s) and category(ies) of membership.

_____

Signature (If an athlete is under age 18, parent or guardian must sign)

Date of Application

☐☐-☐☐-☐☐☐☐ (MM-DD-YYYY)

Important information: Memberships are on a calendar year basis, and expire on December 31. However, if you join between November 1 and December 31 of the current year, the membership will be valid for the following year as well. **Youth members:** New or lapsed memberships must submit a copy of birth certificate or other ID.

☐ Check here if you do not wish your address used as part of a direct mail list.

OPTION 1

JOIN ONLINE AT
www.usatf.org/membership

You will receive your new Membership # – Instantly!!

Have your previous membership # and password ready as they will be needed for the renewal process

OPTION 2

MAIL TO YOUR LOCAL ASSOCIATION

Mail the completed application and appropriate membership fees to your local Association. Mailing addresses can be found at www.usatf.org/associations

Adult Membership (19 yrs & over) $ _____

$ 30.00 (1-year) $ 80.00 (3-years)
$ 55.00 (2-years) $ 100.00 (4-years)

Youth Membership (18 yrs & under)

$ 20.00 x 1 = $ 20.00

# of membership years

CONTRIBUTIONS (TAX DEDUCTIBLE) $ _____

Please direct my contribution to ☐ LDR ☐ Youth ☐ Masters T & F ☐ RW ☐ Association Programs ☐ Unrestricted

TOTAL $ 20.00

Please make checks payable to USATF.