



USATF Membership Application

New Member Renewal from previous year – USATF Number _____

Please print or type information

Last Name		First Name		Middle Initial
Address		City		State Zip Code
Phone	Email	Your membership # will be emailed to you. Your email address will not be shared with anyone.		
Date of Birth	Age Today	Gender		
MM-DD-YYYY		M / F		
U.S. Citizen	If no, country of Citizenship			
Y / N				
Club No	Club Name			
0139	Cornhusker Flyers Track Club			

Ethnic Background

Are you Hispanic or Latino? Yes No Decline

What is your race? (Please select one or more races)

- American Indian / Alaska Native
- White / Caucasian
- Asian
- Other
- Black / African American
- Decline to answer
- Native Hawaiian / Pacific Islander

Please check all appropriate sports codes here:

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

Membership Category Codes

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Please use the codes below – you may indicate one or more categories.

AT: Athlete
DA: Disabled Athlete

CH: Coach
CD: Developmental
C1: Coach – Level 1
C2: Coach – Level 2
C3: Coach – Level 3

PA: Parent
OF: Official
OA: Official – Association
ON: Official – National
OM: Official – Master
AD: Administrator
FN: Fan

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.

Membership Fees & Registration Options

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

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

OPTION 2

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 _____ = \$ _____
[# of membership years]

CONTRIBUTIONS (TAX DEDUCTIBLE) \$ _____
Please direct my contribution to LDR Youth
 Masters T & F RW Association Programs
 Unrestricted

TOTAL \$ _____

Please make checks payable to USATF.