



2017/2018 PROFESSIONAL MEMBERSHIP APPLICATION

\$89

Must be at least 18 years of age to apply. • **Membership will expire July 31, 2018**

PROFESSIONAL MEMBERSHIP INFORMATION

Online registration available at usagym.org/memberservices

RENEWING MEMBERSHIP NO. _____ NEW MEMBERSHIP All fields marked * are REQUIRED

*First Name _____ MI _____ *Last Name _____

*Date of Birth _____ *Sex: Male Female *Citizen: Yes No, provide name of country of citizenship _____

Ethnicity/Race: African American American Indian Asian Caucasian Hispanic Pacific Islander Two or More Races choose not to respond
Submission of this information is completely voluntarily. Data collected is provided annually to the United States Olympic Committee (U.S.O.C.) to strengthen diversity among all Olympic sports.

*Mailing Address _____ *City _____ *State _____ *Zip _____

*Email Address _____ *Phone _____

Club Name _____ Club No. _____ Club Owner _____

***Professional Disciplines** Required — Mark the discipline(s) that apply • \$89 per year for the first discipline. Add \$15 for each additional discipline.

Women's Artistic Men's Artistic Acrobatic Rhythmic Trampoline/Tumbling GFA

PROFESSIONAL MEMBERSHIP AGREEMENT

Must be 18 years or older. Signature is required for acceptance of membership

All persons requesting Professional Membership must sign this disclosure statement. If this disclosure is not signed, the application will not be processed.

All members of USA Gymnastics agree to abide by and be bound by USA Gymnastics Safe Sport and Code of Ethical Conduct, all safe sport rules, policies and procedures promulgated by the U.S. Center for Safe Sport as they may be amended from time to time, as well as, all applicable criminal codes. All members of USA Gymnastics agree to be subject to the jurisdiction of the U.S. Center for Safe Sport and agree that any sanctions imposed by the Center extend to my participation in all National Governing Body events or activities and may be posted publicly and include information regarding the misconduct involved.

Additional Requirements for Professional Membership include Safety/Risk Management Certification, Safe Sport Certification and successfully complete Criminal Background Check through the National Center for Safety Initiatives (NCSI).

- SAFETY/RISK MANAGEMENT CERTIFICATION: Must complete and pass a USA Gymnastics Safety/Risk Management Certification course (live or online). Certification is valid for 4 years.
- SAFE SPORT CERTIFICATE: Must complete and pass a designated safe sport course. Certificate is valid for 2 years.
- CRIMINAL BACKGROUND CHECK: Must successfully complete the Criminal Background Check Screening. All background checks are performed exclusively by the National Center for Safety Initiatives (NCSI). Background checks received from other agencies or for other organizations do not apply. Green light status must be granted by NCSI. Background checks are valid for 2 years.

If the above requirements of Professional Membership are not met, your membership will be placed in a pending status (not valid) and will be unable to participate in any USA Gymnastics sanctioned activity, nor will a membership card be available to print online. Once membership requirements have been completed the member will be eligible for participation in USA Gymnastics sanctioned activities.

Please note additional USA Gymnastics University certification may be required. Please visit usagym.org/education for details.

I understand the responsibilities of USA Gymnastics Professional Membership as listed above. I understand that my membership will be placed into a pending status and I will not be eligible to participate in any USA Gymnastics sanctioned event until requirements have been met.

Printed Name _____ Signature _____ Date _____

*Automatic annual one year recheck will occur on or about the anniversary of your first background check. For more info, visit usagym.org/background_overview.

PAYMENT INFORMATION

Credit Card _____ Card # _____ CVV Code _____ Exp. Date _____

Print Cardholder Name _____ Signature _____

Cardholder Phone _____ Email (for receipt) _____

PAYMENT TOTALS

Make checks payable to USA Gymnastics

Membership Fee: **\$89** _____

Addtl Discipline(s) _____

RUSH Fee: \$ _____

TOTAL PAYMENT \$ _____
authorized/enclosed

Memberships are NON-REFUNDABLE and NON-TRANSFERABLE. Professional Membership registration fee is \$89. Full Payment required for processing. Please print clearly, and double check credit card information for accuracy.

Return completed form and payment to: USA Gymnastics, 130 E. Washington St. Ste. 700, Indianapolis, IN 46204 or by fax: 317.692.5212
Attention: Member Services

Office Use Only

Number _____

Rec'd Date _____

Payment Amt _____

Check No. _____

Email sent date _____

Approval _____

By _____ Other _____

Questions? Contact Member Services at
800.345.4719 or membership@usagym.org