



2007 Kentucky Team Membership Application

Team Name	Team Abbreviation				
		Four Characters →			

hereby make application for (check one) New Renewal annual membership (November 1, 2006, to December 31, 2007, in United States Masters Swimming Inc., as administered by the Kentucky Local Masters Swimming Committee. The team, if accepted, agrees to abide by and be governed by all rules and regulations of both United States Masters Swimming Inc. and the Kentucky Local Masters Swimming Committee. NOTE: The name and address on this form may be used publicly when requested for club swimming information.

Signature	Title	Date
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Mail Correspondence to:

Name	Title	
Address		
City	State	ZIP Code
Home Telephone	Work telephone	
Email		

Team Delegate to LMSC Meetings:

Name		
Address		
City	State	ZIP Code
Home Telephone	Work telephone	
Email		

Team Registrar:

Name		
Address		
City	State	ZIP Code
Home Telephone	Work telephone	
Email		

Safety Coordinator:

Name		
Address		
City	State	ZIP Code
Home Telephone	Work telephone	
Email		

Pool Where Your Team Works Out:

Name		
Address		
City	State	ZIP Code

Application Fee \$30.00

Mail this form and check for application fee to:

For LMSC Office Use Only		
Date Received	Date Acknowledged	

**Kentucky Masters Swimming
Registrar
3608 Trail Creek Pl.
Louisville, KY 40241-6286**