



Membership Application

All memberships expire on December 31, 2012



Register online at:
<http://www.usms.org/reg/>

I was a U.S. Masters Swimming member before 2012.

Please print clearly.

Register with the same name you will use in competition.

First Name _____ Middle Initial _____ Last Name _____

If you have registered with USMS before using another name, indicate that name here. _____

Street Address _____

City/State/ ZIP _____ Phone _____ home cell business

Date of Birth _____ Current Age _____ Gender Male Female

MEMBERSHIP Swim Kentucky (SKY) Teams or Unattached

- Ashland YMCA Masters Swimming (AYMS), Ashland
- Cardinal Masters (CARD), Louisville
- Clear Creek Masters (CCM), Shelbyville
- Lakeside Masters (LAKE), Louisville
- Milestone Marlins Masters (MMM), Louisville
- Madisonville YMCA (MADY), Madisonville
- Swim Louisville Masters (SLM), Louisville
- Western Kentucky Green Gators (WKGG), Bowling Green
- Wildcat Masters (WILD), Lexington
- YMCA Southern Indiana Masters (YSWIM), New Albany, Indiana
- Independent (INDE)

MAILINGS

Email address _____

Email addresses are used by the Kentucky LMSC to remind members of registration and to send information about upcoming events in Kentucky. U.S. Masters sends newsletters and will allow sponsors to send email unless indicated below.

Membership cards will be mailed directly to members when an email address is not given. Please allow two weeks processing time.

I also want to receive my membership card by U.S. Mail.

I do not want to receive mailings from sponsors.

I do not want to receive the SWIMMER magazine.

RELATED MEMBERSHIPS & CERTIFICATIONS

I am a Masters coach Certified Official

I am a member of YMCA USA Triathlon USA Swimming

	FULL-YEAR FEES (if today's date is between Nov. 1, 2011 and Aug. 31, 2012)	END-OF-YEAR FEES (if today's date is between Sept. 1, 2012 and Oct. 31, 2012)
US Masters Swimming full-year fee (\$31) or end-of-year fee (\$26) plus LMSC (local governing body) fee (\$10):	\$41	\$36
I wish to contribute this amount to the International Swimming Hall of Fame Foundation:		
I wish to contribute this amount to the USMS "Swimming Saves Lives" Fund:		
Total:		

Benefits of Membership include a subscription to the U.S. Masters Swimming magazine, *SWIMMER*, during the length of the membership year (\$8 of the annual dues is designated for the magazine subscription).

U.S. Masters Swimming registered swimmers are covered with secondary accident insurance in:

1. Practices supervised by a U.S. Masters Swimming member or USA Swimming certified coach where all swimmers are U.S. Masters Swimming registered
2. U.S. Masters Swimming sanctioned meets where all competitors are U.S. Masters Swimming registered.

WAIVER: I the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all the risks inherent in Masters swimming (training and competition) including possible permanent disability or death, and agree to assume all of those risks. AS A CONDITION OF MY PARTICIPATION IN THE MASTERS SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING INC., THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITES. In addition, I agree to abide by and be governed by the rules of USMS.

Signature _____ (required) Today's Date _____ (required)

Please make check for total fee plus any donation amounts payable to: **Kentucky Masters Swimming**
Mail check and completed form to: **Kentucky Masters Swimming, 910 Glenridge Dr., Louisville, KY 40242**