



2008 Membership Application

Renewal – my last USMS number was _____
 New registration

Register with the same name you will use for competition. Please print clearly.

| | | | | |
|--|-----|--------------------------|----------------|-------------------------|
| Last Name | | First Name | | MI |
| Street Address | | | | |
| City/State/Zip | | | Phone | |
| Date of Birth (mm/dd/yy) | Age | Sex (circle) M F | E-mail address | |
| North Carolina Masters Swimming Club THE LOWE'S YMCA MASTERS Chapter (TLYM) | | | | Today's Date (required) |

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 ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS.

Signature (required): _____

Fees when registering between the dates

_____ I wish to contribute \$1.00 (or \$ _____) to the International Swimming Hall of Fame Foundation. I have added this amount to my 2008 registration fees.

_____ I wish to contribute \$1.00 (or \$ _____) to the United States Masters Swimming Foundation. I have added this amount to my 2008 registration fees.

_____ I wish to contribute \$1.00 (or \$ _____) to North Carolina Masters Swimming Club. I have added this amount to my 2008 registration fees.

_____ I coach Masters swimmers.

_____ I am a Swimming Official with _____

| 2008 Yearly Fees & effective date 11/1/07 to 12/31/08 | | End of 2008 Discount & effective date 9/1/08 to 12/31/08 | |
|--|----------------|---|----------------|
| USMS fee | \$25.00 | USMS fee | \$20.00 |
| LMSC fee | \$10.00 | LMSC fee | \$5.00 |
| Total Fee | \$35.00 | Total Fee | \$25.00 |

Total fee must be paid, Membership expires December 31st, 2008

Please check :

I wish to receive my LMSC's newsletter by _____ Email or by hard copy _____ via US Postal Service bulk mail

On rare occasions, USMS may need to inform me of an important issue, I DO/ DO NOT wish to receive them.
 A USMS sponsor may wish to offer you information emailed from the USMS National Office, I DO / DO NOT wish to receive them.
(Email addresses are not supplied to the sponsor.)

Benefits of Membership include: A subscription to USMS's magazine, *USMS SWIMMER*, during the length of the membership year (\$8.00 of the annual dues is designated for the magazine subscription), and periodic mailings from the Local Masters Swimming Committee.

- USMS Registered swimmers are covered with secondary accident insurance:
- 1) in practices supervised by a USMS member or USA Swimming certified coach where all swimmers are USMS registered.
 - 2) in USMS sanctioned meets where all competitors are USMS registered.

Please allow 2 weeks processing time.

Please make check for total fee plus any donation amounts payable to: LMSC for NC

**Mail check and completed form to: George S. Simon
 Registrar, LMSC for NC
 10229 Boxelder Dr
 Raleigh, NC 27613-6139**