



## 2017 CLUB MEMBERSHIP APPLICATION

Club Name		Club Abbreviation				
I hereby make application for (check one) ___new___ renewal annual membership (November 1, 2016, to December 31, 2017), in <b>United States Masters Swimming, Inc.</b> , as administered by the Local Masters Swimming Committee listed below. The club, if accepted, agrees to abide by and be governed by all rules and regulations of both United States Masters Swimming, Inc., and the Local Masters Swimming Committee listed below. NOTE: The name and addresses on this form may be used publicly when requested for club swimming information.						
Signature		Title		Date		
<b>PRIMARY CLUB CONTACT TO USMS:</b>						
Name		Title				
Address						
City		State		ZIP Code		
Home Tel: (     )     )		Work Tel: (     )     )		Ext:		
E-Mail Address:						
<b>CLUB HEAD COACH:</b>						
Name		Title				
Address						
City		State		ZIP Code		
Home Tel: (     )     )		Work Tel: (     )     )		Ext:		
E-Mail Address:						
<b>OTHER _____:</b>						
Name		Title				
Address						
City		State		ZIP Code		
Home Tel: (     )     )		Work Tel: (     )     )		Ext:		
E-Mail Address:						
<b>CLUB NOTIFICATION EMAIL:</b> This is an optional email address that you may enter if you wish to receive an emailed notification each time a new member joins your club.						
Optional E-Mail Address for new registration notifications:						

**POOL LOCATIONS:** Go to <http://www.usms.org/placswim/> to enter all the locations and workout times for your club. This database is searchable by zip code so make sure you have your pool's complete address before you begin.

Please do not send my club a printed USMS Rule Book. We will access it online.

<b>Make check payable to:</b> Ozark LMSC
<b>Mail this form to:</b> Diann Bauer Ozark LMSC Registrar 515 N Helen St Carbondale, IL 62901-1114

Application Fees:      Local: \$ <u>  00.00  </u> USMS: \$ <u>  41.00  </u> TOTAL: \$ <u>  41.00  </u>
<b>For LMSC office use only</b> Date received: Date processed: