



## United States Master Swimming/Delaware Valley Masters Swimming 2009 Membership Application

New	Renewal	Transfer
Former USMS No if applicable (renewal or transfer):		

Transfers, please include a copy of your USMS card	Date last competed for your former club:	
There must be at least a 60 day period between competing for your former club and joining your new club.		

Please register with the same name you will use for competition. Please print clearly.		Today's Date (required mm/dd/yyyy)		Office Use	
Last Name			First name		Middle Initial
Street Address					Apt No.
City		State	Zip Code	Phone	
Date of Birth (mm/dd/yyyy)	Age	Sex <b>M    F</b>		E-mail Address	
Club Name/Unattached			Chapter Team (or pool where you practice – zip code)		

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):** \_\_\_\_\_

For 2009, DV-LMSC offers a reduced membership fee to our 18-24 year old swimmers as of the date of your registration.				
<b>Please make check payable to DV-LMSC</b>  Mail Check and completed form to: DV-LMSC (Registrar) c/o Patrick Lee Loy 2129 Catharine Street Philadelphia, PA 19146-1207  Contact info: email: <a href="mailto:pleeloy@yahoo.com">pleeloy@yahoo.com</a> cell: 267.254.9527	<b>Membership Fee (new or renewals only)</b>	18-24    11/1/08 - 12/31/09    \$10.00	25+    11/1/08 - 12/31/09    \$ 35.00	
		25+    9/1/09 -12/31/09    \$ 25.00		
	<b>Membership Fee (transfers only)</b>	11/1/08 - 12/31/09: \$ 6.50		
<b>Please allow 2 weeks processing time.</b>	<b>Donations</b>	International Swimming Hall of Fame		
		USMS Foundation		
<b>Email addresses are not supplied to the sponsor.</b>	<b>Total Fees and Donations:</b>			
On rare occasions, USMS may need to inform you of an important issue, I wish to receive them.	<b>Yes</b>	<b>No</b>		
A USMS sponsor may wish to offer you information emailed from the USMS National Office.	<b>Yes</b>	<b>No</b>		

Note: \$8.00 of the membership fee is designated to a subscription to *USMS SWIMMER* magazine.

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.