



2019 CLUB MEMBERSHIP APPLICATION

Club Name		Club Abbreviation (may be 2-5 characters)					
I hereby make application for (check one) <input type="checkbox"/> new <input type="checkbox"/> renewal annual membership (October 1, 2018, to December 31, 2019), in United States Masters Swimming, Inc. , 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	
PRIMARY CLUB CONTACT TO USMS:							
Name				Title			
Address							
City				State		ZIP Code	
Home Tel: ())				Work Tel: ())		Ext:	
E-Mail Address:							
CLUB HEAD COACH:							
Name				Title			
Address							
City				State		ZIP Code	
Home Tel: ())				Work Tel: ())		Ext:	
E-Mail Address:							
OTHER _____:							
Name				Title			
Address							
City				State		ZIP Code	
Home Tel: ())				Work Tel: ())		Ext:	
E-Mail Address:							
CLUB NOTIFICATION EMAIL: 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:							

CLUB FINDER LISTING: Manage your club through the USMS Club Admin portal (<https://www.usms.org/club-central/club-login>) to showcase your facilities and coaches, enter workout times, and provide a direct link for prospective members to email your club contact. **If you also send the information to swimsalt@bellsouth.net it will be posted on the Georgia Masters web page.**

RULE BOOK: Will you join us in **going GREEN**? Leave this option unchecked and view the Rule Book online (<https://www.usms.org/rules>).

I would like a printed USMS Rule Book

Make check payable to: <i>GEORGIA LMSC</i>
Mail this form to: <div style="text-align: center;"> Andy Rettig (Georgia Masters Registrar) 2652 Amy Ct Duluth, GA 30096-4140 (678) 417-6411 </div>

Application Fees:	Local: \$ <u>18.00</u>
	USMS: \$ <u>45.00</u>
	TOTAL: \$ <u>63.00</u>
For LMSC office use only	
Date received:	
Date processed:	