2011 Simons Rock Pace/Makers
Membership Application

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

____ **New Registration**

____**Renewal – my last USMS number was** _____

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	
				Today's Date

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*): _____

Required Membership Fees (Choose One)

~~$_____ $34.00 - 1 year membership fee (November 1, 2010 – December 31, 2011)~~

$_____ $29.00 – Reduced Fee (September 1, 2011 – December 31, 2011).
Only use this option if you are registering after September 1, 2011

Optional Additional Fees

_____ I wish to contribute this amount $ _____ to the USMS "Swimming Saves Lives" Fund. I have added this amount to my registration fees.
_____ I wish to contribute this amount $ _____ to the International Swimming Hall of Fame Foundation. I have added this amount to my registration fees.
_____ I wish to contribute this amount $ _____ to the NE LMSC Hall of Fame. I have added this amount to my registration fees.

_____ **Total of my check payable to "NE LMSC" and mailed with this form to:**
NE LMSC Registrar, PO Box 206, Londonderry, NH 03053-0206

Your Simons Rock Pace Makers 2011 membership includes your USMS membership, subscription to the bimonthly USMS SWIMMER Magazine through Jan/Feb 2012 ($8 of the annual dues is designated for the magazine subscription). Members of USMS are covered with secondary accident insurance in practices supervised by a USMS member of USA Swimming certified coach where all swimmers are USMS registered and in USMS sanctioned meets where all competitors are USMS registered. The USMS policy on the privacy of member information is at: www.usms.org/admin/privacy.shtml

I am a Masters coach – Yes No
I am a member of – YMCA ___ USA Triathlon___ USA Swimming ___
I would like to have someone contact me about volunteer opportunities – Yes No

Occupation/Specific skills I can provide _____