

CSP TIDERIDERS MASTER SWIM CLUB (CSPM)

and

UNITED STATES MASTERS SWIMMING (USMS)

NEW MEMBER APPLICATION ONLY

Membership Application for November 1, 2007 through December 31, 2008

The nominal 2008 Masters Membership Fee is \$30.00 of which \$17.00 goes to the USMS National Association, \$8.00 pays for a subscription to USMS SWIMMING (a bimonthly magazine), and \$5.00 goes to the OZARK Local Masters Swimming Committee (LMSC) in the Breadbasket Zone. CSPM offers discounted memberships to swimmers 75 years and older and to full-time students 25 years and younger; in either case, the 2008 Masters Membership Fee is reduced to \$25 of which \$17.00 goes to the USMS National Association and \$8.00 pays for a subscription to USMS SWIMMING. For insurance purposes, USMS membership is required for participation in any USMS Masters function (meets, practices, socials, etc.); SLAM membership is required for participation in any CSPM team practices and social events. (See <http://www.usms.org/> and <http://www.cpswim.com/Default.aspx?tabid=7678> for info).

2008 USMS Membership Application				
<small>Register with same name as you would use for competition. Please print clearly.</small>				
Last Name	First Name	Middle Initial	Office Use only:	
Street			Apartment	
City	State	Zip	Home Phone	Work Phone
Date of Birth:	Age:	Sex:	Today's Date: Mo. Day Year	
Club (Must be a USMS registered club or you will be registered as "unattached") CSP Tideriders Master Swim Club (CSPM)			Email Address:	
Primary Workout Location:			Occupation:	
Fees: USMS Fee: \$17.00 Magazine: \$ 8.00 Ozark Fee: \$ 5.00 *(unless discounted) Total Fee: \$30.00			Renewal? Yes /No <input type="checkbox"/> Name Change: Old Name:	
<u>Voluntary Contributions:</u>				
United States Masters Swimming Endowment: \$ _____ (http://www.usms.org/admin/lmschb/lmsc_hb_endowment.pdf)				
International Swimming Hall of Fame: \$ _____ (http://www.ishof.org/)				
<u>Membership Discounts (*):</u>				
Are you a full-time student 25 years and younger or are you 75 years and older?				
If "YES", please provide date of birth here (_____) and include a check for only \$25 (instead of \$40) plus any voluntary contributions listed above (full-time students need to verify full-time status with a copy of their College/University Student ID)				
<u>USMS Administration (please circle your answer for each of the following statements):</u>				
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 e-mailed from the USMS National Office: I DO / DO NOT wish to receive them.				
(E-mail addresses are not supplied to the sponsor).				
I coach Masters Swimmers: Yes / No If yes, where do you coach? _____ Are you a member with ASCA? Yes / No				
I am a Swimming Official: Yes / No If yes, with whom?				
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.				
Applicant Signature _____				Date _____

PROCESS: Make checks payable to USMS Ozark Master Swimming Committee (or USMS Ozark) for \$30.00 (*unless discounted to \$25) plus any voluntary contributions. Send **SIGNED** completed waiver above with **CHECK** to Richard H. ("Hap") Gentry, Ozark Registrar, at 9034 Monmouth Drive, St. Louis, MO 63117-1020. You will receive your new membership card by USPS mail. Applications **without signatures or checks will be returned** for completion. CSPM reserves the right to withhold your membership card if ALL steps of the 2008 Renewal Process, as outlined in CONSTANT CONTACT communications, have NOT been completed.