



## 2021 Workout Group MEMBERSHIP APPLICATION

<b>Workout Group Name</b>		<b>Abbreviation (may be 2-5 characters)</b>				
<b>Parent Club Name</b>						
<p>I hereby make application for (check one) ___new___ renewal annual membership (October 1, 2020, to December 31, 2021), in <b>United States Masters Swimming, Inc.</b>, as administered by the Local Masters Swimming Committee listed below. The workout group, 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, as well as its parent club. NOTE: The name and addresses on this form may be used publicly when requested for club and workout group swimming information.</p>						
Signature		Title		Date		
<b>PRIMARY CONTACT TO USMS AND THE PARENT CLUB:</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:						
OTHER:						
_____						
Name		Title				
Address						
City		State		ZIP Code		
Home Tel: (     )     )		Work Tel: (     )     )		Ext:		
E-Mail Address:						
<b>WORKOUT GROUP 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:						

**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.

**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

<b>Make check payable to:</b> <b>Maryland LMSC</b>
<b>Mail this form to:</b> <b>John Zarkowsky</b> <b>520 Epping Forest Road</b> <b>Annapolis, Maryland 21401-6518</b>

Application Fees:     Local: \$ <u>    0.00    </u> USMS: \$ <u>   60.00   </u> TOTAL: \$ <u>   60.00   </u>
<b>For LMSC office use only</b> Date received: Date processed: