



2010 CLUB MEMBERSHIP APPLICATION

Club Name	Club Abbreviation			
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I hereby make application for (check one) **new** **renewal** annual membership (November 1, 2009, to December 31, 2010), 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 address on this form may be used publicly when requested for club swimming information.

Signature	Title	Date
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MAIL CORRESPONDENCE TO:

Name	Title	
Address		
City	State	ZIP Code
Home Tel: ()	Work Tel: ()	Ext:
E-Mail Address:		

CLUB DELEGATE TO LMSC MEETINGS:

Name	Title	
Address		
City	State	ZIP Code
Home Tel: ()	Work Tel: ()	Ext:
E-Mail Address:		

CLUB REGISTRAR:

Name	Title	
Address		
City	State	ZIP Code
Home Tel: ()	Work Tel: ()	Ext:
E-Mail Address:		

COACH:

Name	Title	
Address		
City	State	ZIP Code
Home Tel: ()	Work Tel: ()	Ext:
E-Mail Address:		

POOL WHERE YOUR CLUB WORKS OUT:

Name		
Address		
City	State	ZIP Code

Application Fees: Local: \$ 20.00
 USMS: \$ 30.00
 Total: \$ 50.00

Make Check Payable To: FGC Masters Swimming

Mail This Form To:
Barbara Protzman
3656 Cypress Fern Way
Coral Springs, FL 33065

FOR LMSC OFFICE USE ONLY		
Date Received	Date Acknowledged	Sent to USMS
NEW CLUB: Date Abbreviation OK'd by National Office		