



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: *(Required)*

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

CLUB DELEGATE TO LMSC MEETINGS: *(Required)*

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

CLUB REGISTRAR: *(Loida Delgado is the state registrar & clubs need not fill this in unless they have their own)*

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

SAFETY COORDINATOR: *(Kathy Keffer-Sharpe is the states safety coordinator & clubs need not fill this in unless they have their own)*

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: **OMS**

Mail This Form To:
 OMS – Loida Delgado
 1708 W. 120 Court S.
 Jenks, OK 74037-2985-08

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