



New Registration Renewal
USMS # _____

Last Name _____ First Name _____ Middle Initial _____

Mailing Address _____ Apt # _____ Today's Date (required) ____/____/____

City _____ State _____ Zip _____

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Home Phone _____ / _____ / _____ Cell Phone _____ Email Address (internal use only) _____

Date of Birth _____ Age _____ Male/Female _____

Please check if you are a...
 Masters swim coach
 Certified swim official

Are you a member of...
 YMCA
 USA Triathlon
 USA-Swimming

Inland NW LMSC's SplashMaster newsletter is sent by email. Do you also want a paper copy mailed to you?
 YES NO

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 ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS.

Signature _____
Date _____

*Questions about affiliating with the right Club/Team?
Talk with your coach, team rep, or the Inland NW registrar*

Club Affiliation

- Unattached Club (no participation in USMS relays)
- Spokane Waves Aquatic Masters (SWAT)
- Lewis-Clark Neptunes Masters Club (LCNM)

Hydropower Masters Swim Club (HMS) - select a workout group/team within the club

<input type="checkbox"/> Lake City Masters	<input type="checkbox"/> Sandpoint West Athletic Club	<input type="checkbox"/> Moscow Chinooks Masters	<input type="checkbox"/> Fairchild AFB Masters
<input type="checkbox"/> Spokane Club Masters	<input type="checkbox"/> Spokane Masters Swim & Tri	<input type="checkbox"/> Tri-Cities Atomic Sturgeons	<input type="checkbox"/> 3 Rivers Masters Swimming
<input type="checkbox"/> Moses Lake Manta Rays	<input type="checkbox"/> Ellensburg Windy City Masters	<input type="checkbox"/> Wenatchee Valley Masters	<input type="checkbox"/> Central Washington Univ
<input type="checkbox"/> Walla Walla Masters	<input type="checkbox"/> Unattached team (relays at zone/natl meets, none at Inland NW meets)		

Fees	Total
<input type="checkbox"/> Individual	\$40.00
<input type="checkbox"/> Senior (age 60+)	\$36.00
<input type="checkbox"/> Junior (age 18-24)	\$36.00
<input type="checkbox"/> Late Year (Sept & Oct)	\$30.00
I wish to contribute this amount to the USMS "Swimming Saves Lives" Fund:	\$
I wish to contribute this amount to the International Swimming Hall of Fame Foundation:	\$
Total Enclosed	\$

Benefits of Membership

- ⇒ **USMS Swimmer Magazine** subscription (\$8 of your membership)
- ⇒ **SplashMaster** newsletter and communications from the Inland NW Masters Swimming Committee
- ⇒ Secondary accident insurance in practices supervised by a USMS member or USA Swimming certified coach where all swimmers are USMS registered and in USMS sanctioned meets where all competitors are USMS registered.
- ⇒ Coached workouts around the Inland NW and at usms.org/training
- ⇒ Avenues for competition and fitness events
- ⇒ Camaraderie and FUN!

Make check payable to: IWMSC
Mail check & form to: Sean Murphy, Registrar
PO Box 161
Richland, WA 99352
Questions? Email IWRegistrar@usms.org