



**U.S. MASTERS
SWIMMING**

2019 WORKOUT GROUP MEMBERSHIP APPLICATION

Workout Group Name		Club Abbreviation (may be 2-5 characters)					
Parent Club Name							
Local Masters Swimming Committee (LMSC): OKLAHOMA							
I hereby make application for (check one) <input type="checkbox"/> new <input type="checkbox"/> renewal annual membership (October 1, 2018, to December 31, 2019), in U.S. Masters Swimming , as administered by the Local Masters Swimming Committee (LMSC) listed above. The workout group, if accepted, agrees to abide by and be governed by all rules and regulations of both U.S. Masters Swimming, and the LMSC listed above. NOTE: The name, addresses, and contact information on this form may be used publicly when requested for club and workout group swimming information.							
Signature				Title		Date	
PRIMARY CONTACT TO USMS & PARENT CLUB:							
Name				USMS ID <small>(If you don't have one, leave this blank)</small>		Title	
Address							
City				State		ZIP Code	
Home Tel: ()				Work Tel: ()		Ext:	
E-Mail Address:							
WORKOUT GROUP HEAD COACH:							
Name				USMS ID: <small>(If you don't have one, leave this blank)</small>			
Home Tel: ()				Work Tel: ()		Ext:	
E-Mail Address:							
FACILITY:							
Facility Name							
Address							
City				State		ZIP Code	
Website: <small>(If you don't have one, leave this blank)</small>							
Facebook Link: <small>(If you don't have one, leave this blank)</small>							
WORKOUT GROUP NOTIFICATION EMAIL: 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 workout group.							
Optional E-Mail Address for new registration notifications:							

CLUB FINDER LISTING: Manage your workout group 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 workout group 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

<p>Make check payable to: OMS</p>	<p>Application Fees: Local: <u>\$11.00</u></p> <p style="text-align: right;">USMS: <u>\$45.00</u></p> <p style="text-align: right;">TOTAL: <u>\$55.00</u></p>
<p>Mail this form to: OMS – REGISTRAR Kirsten Hoffman 1812 Eastern Ave Stillwater, OK 74074</p>	<p>For LMSC office use only</p> <p>Date received:</p> <p>Date processed:</p>