

2006

# ILLINOIS MASTERS SWIMMING ASSOCIATION

## 2006 ONE YEAR MEMBERSHIP APPLICATION

www.ILMSA.com

**PRINT LEGIBLY!** Register with the same name you will use in competition.

|   |                                      |  |  |                  |  |   |                    |
|---|--------------------------------------|--|--|------------------|--|---|--------------------|
| <b>First Name</b>   |                                      | <b>Init.</b>                           |  | <b>Last Name</b> |  |   |                    |
| <b>Address</b>  |                                      |  | <b>City</b>  |                  | <b>State</b>   |   | <b>Zip</b>         |
| <b>Telephone</b>  |                                      |  | <b>Email</b>   |                  |  |   |                    |
| <b>Gender</b>   | <b>Male</b> <input type="checkbox"/> | <b>Female</b> <input type="checkbox"/> | <b>Date of Birth (M-D-Y) (required)</b>  |                  | -  | - | <b>Current Age</b> |
| <p><b>YOUR REPRESENTATION:</b> When you compete in events within the state of Illinois, you swim for your subgroup (i.e. your workout group) or club. If you check Team Illinois Masters and compete outside of Illinois at a USMS sanctioned meet, you represent Team Illinois Masters (IM) and may swim on IM relays. Unattached swimmers are not eligible for relays.</p> <p style="text-align: center;">Check one box ↓</p> <p><b>Team Illinois Masters</b> <input type="checkbox"/> Name of Subgroup or Independent _____</p> <p>Or <b>CLUB</b> <input type="checkbox"/> Name of Club _____</p> <p>Or <b>UNATTACHED</b> <input type="checkbox"/></p>   |                                      |  |  |                  | <p>Do you coach Masters Swimmers?<br/><b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/></p> <p>Are you a Certified Official?<br/><b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/></p> |   |                    |
| <p><b>WAIVER <u>must</u> be signed:</b></p> <p>"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 OF 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."</p> <p><b>Signature:</b> _____ <b>Date:</b> _____<br/>(Required)</p> <p>By my signature on this registration, I agree to allow Illinois Masters Swimming Association or USMS to publish my photo and/or writings in all of its publications and websites pursuant to the licensure provisions posted at the <a href="http://www.ilmsa.com/">http://www.ilmsa.com/</a> website. To withdraw my consent, I must submit a written request to the Chair of the Legal Committee, 800 Oak St. Danville, IL 61832, and place my initials here: _____</p> |                                      |  |  |                  |  |   |                    |
| <p><b>Membership fees: \$34 if you join between Nov. 1, 2005 and Aug. 31, 2006.</b></p> <p>Late season membership: Available from 9/01/06 to 12/31/06. Cost: \$ 20</p> <p>One-Event Membership is available at each event. Please inquire with the meet director.</p>   |                                      |  |  |                  | <p>For Office Use Only:<br/>Date Received:</p>   |   |                    |
| <p><b>Optional contributions:</b> In addition to the membership dues above:</p> <p>\$ _____ Donation to ILMSA (Always appreciated &amp; tax deductible!)</p> <p>\$ _____ \$1 (or more) Donation to the USMS Endowment Fund. (Tax deductible)</p> <p>\$ _____ \$1 (or more) Donation to the USMS Foundation. (Tax deductible)</p> <p>\$ _____ \$1 (or more) Donation to the International Swimming Hall of Fame. (Tax deductible)</p>  |                                      |  |  |                  | <p>Check #: _____ Amount: _____</p>  |   |                    |
| <p><b>\$ _____ Total</b></p> <p>Make check payable to <b>ILMSA</b> and deliver, with this form, to: <b>ILMSA Registrar</b></p> <p><b>800 Oak Street</b> <b>Phone: 847-446-5142</b><br/><b>PO Box 344</b> <b>Fax: 847-446-4566</b><br/><b>Danville, IL 61834</b><br/><b>Registrar@ILMSA.com</b></p>  |                                      |  | <p>2006 membership includes your United States Masters Swimming (USMS) membership and a subscription to <i>USMS Swimmer</i>, the bimonthly magazine of USMS through November/December 2006. Members of United States Masters Swimming are covered with secondary accident insurance in programs 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.</p> |                  |  |   |                    |
| <p><b>Your new USMS card will be mailed to you from the ILMSA Registrar approximately 2 weeks after it is received. Please make several copies of your USMS card when you receive it, to use for meet entries. There is a fee for a replacement card.</b></p> <p style="text-align: center;">The USMS policy on the privacy of member information is at: <a href="http://www.usms.org/admin/privacy.shtml">www.usms.org/admin/privacy.shtml</a></p> <p><input type="checkbox"/> I want to receive the ILMSA newsletter by US Postal Service, rather than by email notification.<br/>(Getting your newsletter from the website <a href="http://www.ILMSA.com">www.ILMSA.com</a> saves our association \$30 per person annually.)</p>   |                                      |  |  |                  |  |   |                    |