



# 2008 Membership Application

Renewal – my last USMS number was \_\_\_\_\_  
 New registration

**Register with the same name you will use for competition. Please print clearly.**

Last Name		First Name		MI
Street Address				
City/State/Zip			Phone	
Date of Birth (mm/dd/yy)	Age	Sex (circle) M      F	E-mail address	
Club Name or unattached			Today's Date ( <b>required</b> )	

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 (required):** \_\_\_\_\_

\_\_\_\_\_ I wish to contribute \$ \_\_\_\_\_ to the Michigan Masters Education Endowment. I have added this amount to my 2008 registration fees.

\_\_\_\_\_ I wish to contribute \$ \_\_\_\_\_ to the International Swimming Hall of Fame Foundation. I have added this amount to my 2008 registration fees.

\_\_\_\_\_ I wish to contribute \$ \_\_\_\_\_ to the United States Masters Swimming Foundation. I have added this amount to my 2008 registration fees.

2008 Yearly Fees & effective date 11/1/07 to 12/31/08	
USMS fee	\$25.00
LMSC fee	\$10.00
<b>Total Fee</b>	<b>\$35.00</b>

**Total fee must be paid, Membership expires December 31<sup>st</sup>, 2008**

Benefits of Membership include: A subscription to USMS's magazine, *USMS SWIMMER*, during the length of the membership year (\$8.00 of the annual dues is designated for the magazine subscription), and periodic mailings from the Local Masters Swimming Committee.

USMS Registered swimmers are covered with secondary accident insurance:

- 1) in practices supervised by a USMS member or USA Swimming certified coach where all swimmers are USMS registered.
- 2) in USMS sanctioned meets where all competitors are USMS registered.

Please allow 2 weeks processing time.

**Make check for total fees plus any donation amounts payable to: Michigan Masters**

**Mail check and completed form to:** Janet Jasker  
 606 West 27<sup>th</sup> St.  
 Holland, MI 49423

**Visit: [www.michiganmasters.com](http://www.michiganmasters.com)**

# Michigan Masters Swimming Scholarship Program Application

**Purpose:** The purpose of this annual scholarship shall be to provide financial assistance of \$1000.00 to eligible Michigan Masters family members.

**Eligibility:** Consideration for this scholarship shall be given to Michigan Masters family members who shall be or attending full- or part-time undergraduate program in day or night school, with at least a 3.0 GPA, who demonstrate potential for outstanding success in their respective field of study. Financial hardship and need may be a criteria for this scholarship. Students are eligible to receive awards for study during their freshmen, sophomore, junior, or senior year. Scholarship is intended to be based on merit, although financial need may be considered.

**Selection Procedure:** The Michigan Masters Swimming Endowment Committee shall select recipients of this scholarship. Nominations may also be forwarded by a Michigan Master Member. All recipients must acknowledge the benefits of the scholarship to the Michigan Masters Swimming Endowment Committee before their scholarship may be renewed.

**Term of Award:** The scholarship shall be awarded for one academic year and may be renewed for subsequent years providing the recipient continues to meet the conditions of eligibility and funds are available.

**Amendments:** The Michigan Masters Swimming Endowment Committee shall have the final authority to make changes in these guidelines.

## **Applicants Requirements:**

Sign and date application along with submitting the following information:

Transcript of records  
Short biography of yourself  
Name of Institution attending  
3 letters of recommendation

Mail the signed application and the above information to the following:

**Ralph Davis**  
**2683 Cades Cove**  
**Brighton, MI 48114-8985**

---

Applicant's Signature

---

Date