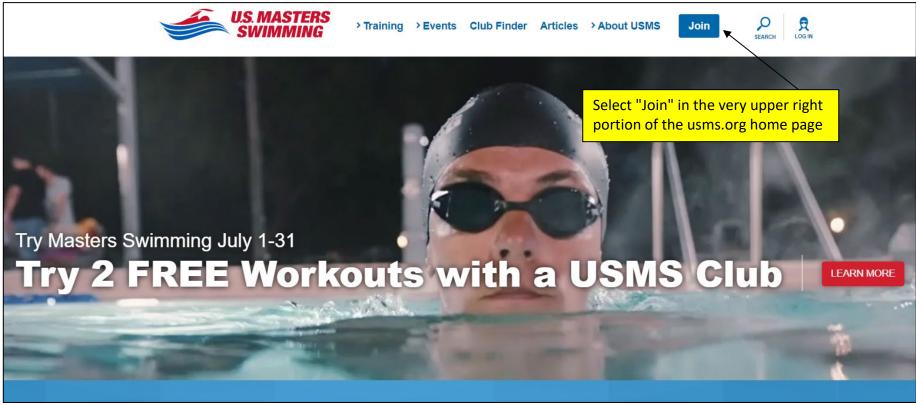
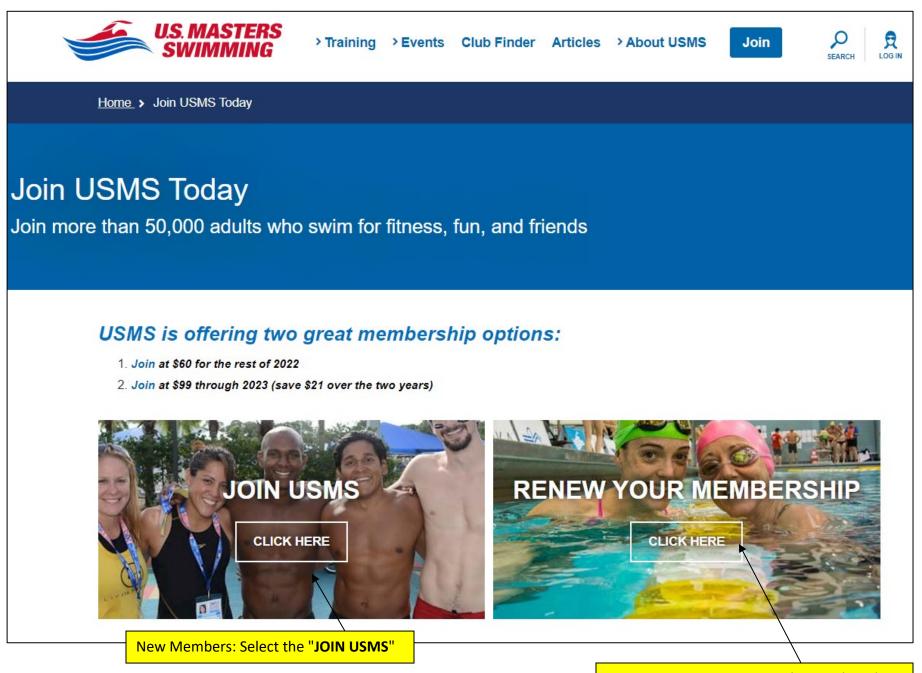


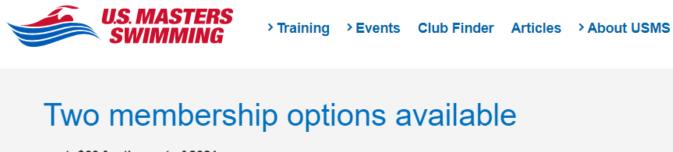
# 2022 Membership Registration (July-October)

Begin here: https://www.usms.org/join-usms/join-or-renew





Renewing or returning Members: Select the "RENEW YOUR MEMBESHIP" option



- 1. \$60 for the rest of 2021
- 2. \$99 through 2022 (save \$21 over the two years)

Login with your My USMS account or input your information below (this tutorial will walk you through the process).

If you are a new or returning member needing to create a My USMS account for the first time, enter the requested information, click "GO".

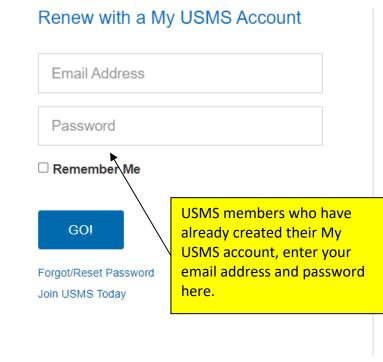
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SEARCH

Join

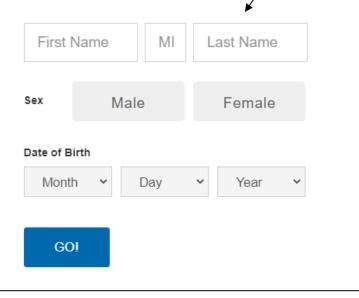
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LOG IN



## Create a My USMS Account

I'm a new or renewing member who has **not** created a My USMS account, here's my personal info.



Contact Information				
	U.S. MASTERS SWIMMING > Training >	Events Club Finder Articles > About USMS Join	SEARCH LOG IN	
	Masters, Let's Join USMS Welcome to U.S. Masters Swimming. Let's finish you			
Enter the requested contact information in the fields below:	Contact Information			
	First Name	MI Last Name		
	Masters	MI Swimming		
	Sex	Birth Month Birth Day Birth Year		
	Male Female	Dec v 25 v 1987 v	•	
	Email Address ⑦	Phone		
	usms@usms.org	<ul><li>✓</li><li>941-256-8767</li></ul>		
	Country			
	United States Of America	~		
	Address		_	
	1751 Mound St			
	City	State Zip Code		
	Sarasota	Florida ~ 34236		

	Do you swim with a club?	
	If you belong to a club you can select it here.	
Your LMSC	Your Club	
Florida	<ul> <li>✓ Select a club</li> <li>✓</li> </ul>	
An LMSC has b	een suggested for you based on your zip code, but you are not required to register in this LMSC	

An LMSC has been suggested for you based on your zip code, but you are not required to register in this LMSC. Select your preferred LMSC and then select your club. If there are registered workout groups (WOG) under the selected parent club, a WOG dropdown menu will automatically appear.

### Your Interests and Preferences – all fields will require a response to be selected

Tell Us More About You				
What is your main reason for joining today?	What is your primary goal?			
Swim with a club	◯ Stay fit			
Participate in an event	O Improve technique			
Content like SWIMMER magazine	◯ Train for a swim event			
Access to the Workout Library	Train for a triathlon			
Attend a clinic	Other			
Attend a certification course				
Other				
How would you like to receive your copy of SWIMMER magazine?	I currently coach or have an interest in coaching others			
Online Print	Yes No			



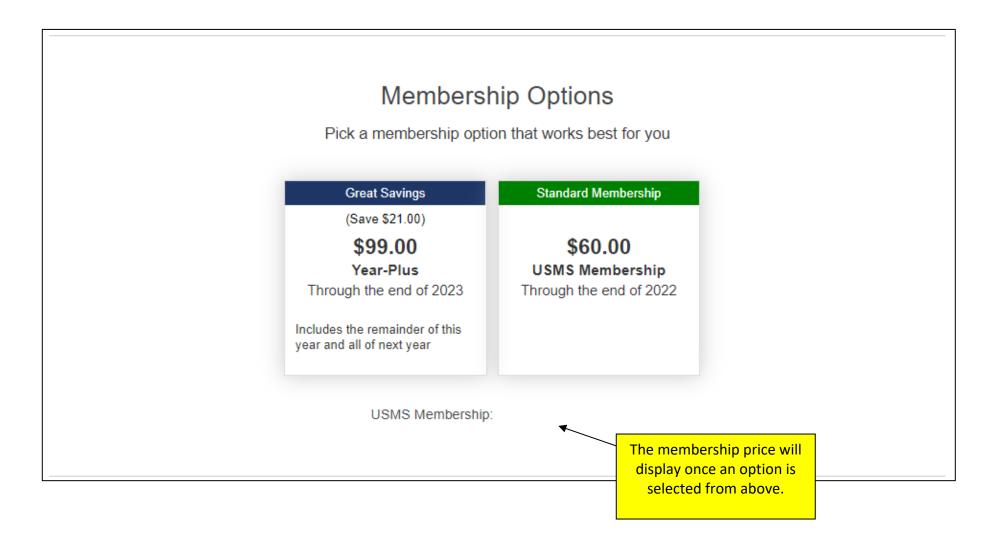
For and in consideration of United States Masters Swimming, Inc. ("USMS") allowing me, the undersigned, to participate in any USMS sanctioned or approved activity, including swimming camps, clinics, and exhibitions; learn-to-swim programs; swimming tryouts; fitness and training programs (including dryland training); swim practices and workouts (for both pool and open water); pool meets; open water competitions; local, regional, and national competitions and championships (both pool and open water); and related activities ("Event" or "Events"); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the "Agreement");

I agree to the terms above

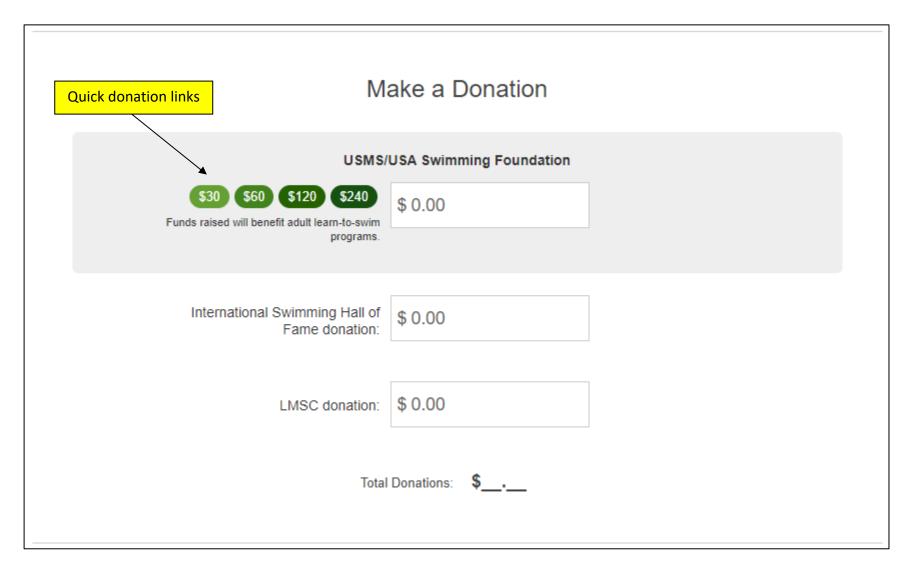
I do not agree to the terms above

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After reading and reviewing the Liability Waiver, select "I agree to the terms above" to be able to continue and complete registration. You will not be able to complete registration without agreeing to the liability waiver.



#### **Donation Options**



If you're finished entering your information, please enter your payment information below. (You will be able to pay with a Visa, Discover, MasterCard or American Express credit cards)

To complete and finalize your registration you will need to read and select this option that you agree that all information you are providing is factual. You understand that this membership is non-refundable, nontransferable, and expires on the date based on your membership length.

Payment Inforr	mation	
•	0.00 0.00 .00	Total charges based on selections above
Name on Card		
Card Number	Security Code	Expiration (mm/yy)
Billing Zip		
I agree that all information I am providing is factual. I agree to th that this membership is non-refundable, non-transferable, and e		
REGISTER		
The USA Swimming Foundation is registered as a 501(c)(3) nonprofit organiz		
deductible to the fullest extent of the law. USA Swimming Foundation's tax ide		
us on guidestar.org under USA Swimming Foundation. A COPY OF THE OFF		
BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALL		
7352) OR www.FloridaConsumerHelp.com. REGISTRATION DOES NOT IMP	'LY ENDORSEMEN	I, APPROVAL, OR RECOMMENDATION
BY THE STATE." FLORIDA REGISTRATION CH22685		

#### **Confirmation Page**

