LANES

LIQUID ASSETS NEW ENGLAND SWIMMING

Liquid Assets New England Swimming
Part of **New England Masters Swim Club, Inc.**

2010 MEMBER REGISTRATION FORM

Return form to team officer or mail to:
LANES, PO Box 990537, Boston, MA 02199

Last Name	First Name	Middle Name
Street Address		
City/State/Zip		Contact Phone
Birth Date (mm/dd/yyyy)	Age	Gender (circle one) M F

Email Address (REQUIRED - Please print clearly)

Referred By/How did you hear about LANES? _____

Please let us know the name of the referring member, or how you found lanes (Web Site, Search Engine, etc)

NEM USE ONLY - Practice Group: LANES Pool: South End Fitness Center

BILLING INFORMATION:

Please select an initial workout billing option (you may change this later, see member web site for details):

☐ Pay-Per-Workout Option ($13 per session)
☐ 10 Punch Drop-in Card ($115)
☐ Unlimited Workout Pass ($75 per month, recurring)
☐ Three month prepaid workout ($210)

You will be billed for LANES membership ($25 annually) plus any additional merchandise, activities or services you incur during your membership until your membership is canceled.
Your also need NEM membership which includes your USMS membership. (See below)
Members of USMS are covered with 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. Please note that NEM 2010 dues are ~$40.
The USMS policy on the privacy of member information is at: www.usms.org/admin/privacy.shtml

NEM / USMS MEMBERSHIP

You can sign up for or renew your NEM/USMS membership at: https://www.clubassistant.com/club/USMS.cfm?l=2

☐ I have already gained a 2010 USMS membership through: _____ Number (REQUIRED): _____

I understand that if I do not provide a valid membership number I will not be permitted to swim with LANES once my 2009 or temporary USMS membership expires. Also, if I am not a member of New England Masters specifically, I will not be able to represent LANES in competition.

☐ I do not intend to swim at workouts, meets or in any other capacity with LANES (social-only member).

PARTICIPANT 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, LIQUID ASSETS NEW ENGLAND SWIMMING (LANES), 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 and LANES.

Signature (REQUIRED): _____ Date: _____

For internal use only: entrd____ email____ mbr fee____ wlcm ____

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