

2009 USMS/GRIN LMSC Registration - GREater INdiana Masters Swimming Association ___New Registration ___Renewal
This registration will be in effect from November 1, 2008 through December 31, 2009

Acronym	Name	Contact/Liaison	E-Mail	Phone
CSI	Cardinal Swimming Indiana Ball State Masters Muncie, IN	Jason Adamowicz	jadamowie@bsu.edu	765-285-2628
CCF	Cole Center Family YMCA	Cindy Miller	cindyswimymca@yahoo.com	260-302-2867
DLMA	Duneland Masters Chesterton, IN	Lisa Whitaker	lizzy278@verizon.net	219-926-7841
FM	Franklin Masters Swim Club Franklin, IN	Pam Gibson	pgibson@franklin-in.gov	317-346-1198
FWAM	Fort Wayne Aquatics Masters Fort Wayne, IN	Matt Vogel	mattvogel@fwaquatics.org	260-484-5838
DOC	IU Masters Swimming Bloomington, IN	Nan Stager	nstager@indiana.edu	812-333-6951
GRIN	GREater INdiana Masters Entire State	Richard Smith	smithdi@earlham.edu	765-966-2523
IAMP	Irish Aquatics Masters Paralympics South Bend, IN	Annie Sawicki	Anne.e.sawicki.5@nd.edu	574-876-9467
ISF	YMCA Indy SwimFit Greater Indianapolis Metropolitan Area	Kris Houchens Mel Goldstein	krishouchens@hotmail.com goldsteimmel@sbcglobal.net	317-475-1823 317-253-8289
KCYM	Kosciusko Community YMCA Warsaw, IN	Patrick Park	ppark@kcyymca.org	574-269-9622
NAST	Noblesville Adult Swim Team Noblesville, IN	Randy Crutchfield	r.crutchfield@insightbb.com	317-841-3425
SCMI	Sugar Creek Masters Crawfordsville, IN	Brent Harlos	bjharlos@yahoo.com	765-361-0403
VALM	Valparaiso Masters Valparaiso, IN	P.J. Ciotola	coach@valpomasters.org	219-746-2893
UTM	Union Township Masters Valparaiso, IN	Casey Hnatiuk	cjhniatuk@hotmail.com	312-388-0062
NACM	Northwest Aquatic Club Masters Fort Wayne, IN	Mike Snyder	Mike.snyder@swimnacs.com	260-637-0340
GRE	Greenwood Aquatic Team Greenwood, IN	Marie Wilson	greenwoodgators@yahoo.com	
THT	Terre Haute Torpedoes Terre Haute, IN	Vince Burton	Goiubig10@yahoo.com	812-243-2910
HPX	Westview Healthplex Indianapolis, IN	Kelly DeFrance	kdefrance@healthplex-indy.com	317-507-9225
KJST	Knollwood Swim Club Granger, IN	Rhonda Bremer	Rhonda.bremer@ourclub.com	574-277-4828

PLEASE PRINT ALL INFORMATION CLEARLY

I am registering with (NAME OF CLUB) _____

If you are registering with GRIN, please indicate Local/Workout Group _____

Last Name _____ First Name _____ Middle Initial _____

Street _____ Apt. # _____

City _____ State _____ Zip _____

Home Phone (____) _____ CELL (____) _____ Work (____) _____

Date of Birth MONTH _____ DATE _____ YEAR 19____ Gender _____

E-Mail Address _____

Please indicate if you coach Masters: Circle YES or NO

Please indicate below by placing initials on the line if you agree with the statement:

- ____ I wish to contribute \$1.00 (or \$ _____) to the International Swimming Hall of Fame Foundation.
 ____ I wish to contribute \$1.00 (or \$ _____) to the United States Masters Swimming Foundation.
 ____ I would like to receive notification that the GRIN Newsletter is available on the internet. PLEASE MAKE SURE THAT YOUR E-MAIL MAILBOX WILL ACCEPT MAIL FROM GRINSWIM@SBCGLOBAL.NET IN SINGLE OR GROUP MAIL.
 ____ I do not want to receive the *USMS SWIMMER* magazine. I understand that there is no discount on fees.
 ____ I do not want to receive mailings from the National Office by the USPS or by E-mail.

RELEASE FROM LIABILITY: 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 the 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 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 covered by the rules of USMS.

Date _____ Signature _____

REDUCED RATES AFTER June 1, 2009	LMSC Fee	USMS Fee*	Total Fee Due
Join Months of November 2008 to 12/31/2009	\$15.00	\$25.00	Pay \$40.00
Join Months of June, July, August 2009 to 12/31/09	\$7.00	\$25.00	Pay \$32.00
Join Month of September 2009 to 12/31/09	\$6.00	\$20.00	Pay \$26.00
Join Month of October 2009 to 12/31/09	\$0.00	\$20.00	Pay \$20.00

*Full time college students between ages 18-24 only pay USMS Fee throughout the registration year

Make all checks payable to GRIN and mail your registration to:
 GRIN LMSC Registrar – Maegen Himes ~ 14706 White Tail Run ~ Noblesville, IN 46060-7883
 E-mail all questions to: M.himes@earthlink.net

Get your card INSTANTLY - Online Registration - www.usms.org/reg/?LMSCID=16